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Eligibility

* indicates a required field

Applicants: please note

Before completing this application form, you should have read the program guidelines.

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regards to these eligibility criteria, please contact **funding@lsbc.vic.gov.au**

If you do contact us throughout the application process, please quote the application number below:

Application Number

This field is read only.

Confirmation of Eligibility

I confirm that the applicant ...

- has read and understands the program guidelines
- is able to demonstrate alignment between their project and the aims of this program
- is a not-for-profit organisation (includes educational institutions such as universities)
- is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- is located in (and/or supplies services to) Victoria
- has satisfactorily acquitted all previous grants
- will adhere to all State and Commonwealth regulations, statutes and policies regarding equal opportunity, employment laws, standards of conduct, health and safety requirements, privacy, and freedom of information.
- is able to demonstrate financial viability
- has the appropriate type and level of insurance for the activities that are the subject of this grant
- will make reports, research and other work enabled by grants publicly available
- will acknowledge Victorian Legal Services Board's support in all published material.
- is not seeking funding for:
 - studies to obtain a degree or diploma
 - government organisations/statutory authorities (unless for exceptional work that is not part of their primary responsibility)

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- the delivery of practical legal training courses
- school and TAFE-based educational programs that are normally part of the curriculum
- recurrent costs
- commercial or fundraising activities
- international travel costs
- prizes, awards, competitions or conference

Please select below: * O Yes You must confirm that all statements above are true and correct.
Contact Details
* indicates a required field
Applicant Details
Applicant * Organisation Name For organisations: please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.
Department/Branch/Faculty
Use this field only if relevant.
Applicant primary address Address
Applicant postal address Address
Applicant primary phone number *
Must be an Australian phone number.
Applicant website

Must be a URL.

Head of	Organisation		
	rganisation/ or (First Name	Office Bearer Last Name	
Position			
Postal Ad Address	ldress		
Primary F	Phone Number		
Must be an	Australian phone nu	umber.	
Primary E	mail		
Must be an	email address.		
Key Proj	ject Contact		
Primary o			
Title	First Name	Last Name	
This is the p	person we will corre	spond with about th	nis grant.
Position I	held in organisa	tion *	
e.g., Manag	ger, Board Member o	or Fundraising Coor	dinator.
Primary o	contact primary	phone number	*
Must be an	Australian phone nu	umber.	
	contact office ph		
_			
Must be an	Australian phone nu	umber.	
Primary o	contact email ad	ldress *	

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This is the address we will use to correspond with you about this grant.

Organisation Details

* indicates a required field

Applicant ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register

ABN

Entity name

ABN status

Entity type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type More information

ACNC Registration
Tax Concessions

Main business location

What type of not-for-profit organisation are you?

Please choose the option that best applies to your organisation.

What is your organisation's annual revenue?

Your revenue includes grants, donations, and other fundraising activities, fees for services, sale of goods, interest, royalties and in-kind donations that have been included in your accounts as 'revenue'. The Australian Charities and Not-for-profits Commission (ACNC) has more detailed information here: https://www.acnc.gov.au/tools/topic-quides/revenue

Project Overview

Project title:

Provide a name for your project/program/initiative. Your title should be short but descriptive

Project Summary

Short Project Description (100 words ma	x)
Provide a short description (100 words recommend	ded) of your project - what are you out to do?
	iou, o. you. p.ojoot iuru.o you out to uo.
What is the key purpose of the project? □ Law Reform □ Legal or Judicial Education □ Legal Research □ Innovative Improvements to Access to Jus □ Other:	tice
Please tick as appropriate	
Project Timing and Cost	
Anticipated start date	Anticipated end date
Please note that funding decisions are unlikely to be known before September at the earliest.	If unknown, provide your best guess.
	Total Project Cost
Total Amount Requested \$	\$ Must be a dollar amount.
Must be a dollar amount. What is the total financial support you are requesting in this application?	What is the total budgeted cost (dollars) of your project?
Project Purpose	
Provide a clear description of your project	ct and its purpose
Tell us why your initiative is needed, and why you	
the outcomes you seek. Provide statistics/evidence between the work you will do and the outcomes you at https://www.fundingcentre.com.au/answersbank your response.	ou seek. Go to the Funding Centre's Answers Bank
What aspect of legal and community con	cern does the project address?
, ,	
What does are seen look like and have will	1
What does success look like and how wil	i you measure it?
Describe the changes you will see if the expected opoints.	outcomes occur. 500 words or less. You may use dot

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Outcomes

Outcomes

Please tell us about the outcomes you expect to result from your project and how they align with our Grants Program Goals and Outcomes.

Outcomes are the changes you expect to occur for the beneficiaries (direct, indirect and/ or intermediaries) of your project. Generally, outcomes can be framed as an increase or decrease in one or more of the following:

- Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)
- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

Immediate outcomes occur directly following an activity (e.g. within 1 month); medium-term outcomes are those that fall between the short and long-term outcomes (e.g. between 1 month and 2 years); and long-term outcomes are those we expect to see years later (e.g. 2, 5, 10 or 50 years after the activity).

Our Grants Program has three broad goals:

- 1.Accessible Legal Services
- 2.Holistic and Diversionary Responses
- 3. Fairer Laws and Processes

Please select, from the dropdown, which of these three VLSB goals and associated outcomes your project aligns with.

Your outcomes			How does your intended outcome link to our outcomes?	Explanatory notes
What changes do you expect will occur as a result of your project? Please be brief. One per row.	outcome to	Which of our outcomes will your project contribute to? If multiple apply pick the most relevant. No more than 1 choice may be selected.	Please explain how your intended outcome helps contribute to ours.	Add notes if you need to provide more context.

What will you do?

Activities

Tell us about the activities you will undertake in order to create change. List one per row.

Activity	Start date	End date	Explanatory notes
One per row. Add more rows if you want to list additional activities.	Must be a date.		Add notes if you need to provide more context.

Who will you reach?

* indicates a required field

Who are the expected primary beneficiaries of this project/program? *

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal – no particularly targeted beneficiaries'

Gender

Proportion of Female Beneficiaries:	•	Proportion of Gender Diverse Beneficiaries	
Percentage of total beneficiaries. Must be a number.		Percentage of total beneficiaries. Must be a number.	

W	here are the bene	ficiaries of this projec	ct I	ocated? *	
	Nation-wide	☐ Frankston City		Manningham City	☐ Pyrenees Shire
	State-wide	☐ Gannawarra Shire		Mansfield Shire	☐ Borough of
					Queenscliffe
	Alpine Shire	☐ Glen Eira City		Maribyrnong City	☐ South Gippsland
_			_		Shire
Ш	Ararat Rural City	☐ Glenelg Shire	Ш	Maroondah City	□ Southern
					Grampians Shire
	Ballarat City	☐ Golden Plains Shire		Melbourne City	☐ Stonnington City
	Banyule City	☐ Greater Bendigo		Melton City	☐ Strathbogie Shire
		City			
	Bass Coast Shire	☐ Greater Dandenong		Mildura Rural City	☐ Surf Coast Shire
		City		-	
	Baw Baw Shire	☐ Greater Geelong		Mitchell Shire	☐ Swan Hill Rural City
		City			_
	Bayside City	☐ Greater Shepparton		Moira Shire	☐ Towong Shire
		City			_
	Benalla Rural City	☐ Hepburn Shire		Monash City	☐ Wangaratta Rural
	-	•		•	City
	Boroondara City	☐ Hindmarsh Shire		Moonee Valley City	☐ Warrnambool City
	Brimbank City	☐ Hobsons Bay City		Moorabool Shire	☐ Wellington Shire

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☐ Buloke Shire		Horsham Rural City	☐ Moreland City		West Wimmera nire
☐ Campaspe Shire		Hume City	☐ Mornington Peninsula Shire		Whitehorse City
☐ Cardinia Shire		Indigo Shire	☐ Mount Alexander Shire		Whittlesea City
☐ Casey City☐ Central GoldfieldsShire		Kingston City Knox City	☐ Moyne Shire☐ Murrindindi Shire		Wodonga City Wyndham City
☐ Colac Otway Shire☐ Corangamite Shire☐		Latrobe City Loddon Shire	□ Nillumbik Shire□ NorthernGrampians Shire		Yarra City Yarra Ranges Shire
☐ Darebin City		Macedon Ranges nire	☐ Port Phillip City		Yarriambiack
Shire The purpose of this quest will be impacted by the p Who will you wo	roj	ect.	tics that provide a geogra	phi	c understanding of who
Project Partners					
Which other organis	ati	ions will be involve	ed in your project?		
Name of Partner Organisations			How will they assist you with the project		
You may add extra rows if required.					

Monitoring and Evaluation

VLSB Indicators

Please select at least two Grants Program indicators. They will appear in the drop down box in the indicator column. We encourage you to select more than two of our indicators if they are appropriate to your project.

Please note that you will only be able to select indicators that relate to the VLSB outcomes you have selected previously in the outcomes section.

Some of these are qualitative and some are quantitative. Where you are required to put a number in, please do so. If not, please leave that target column blank.

Metric	Target	Collection method	Explanatory notes
Which of our metrics	Identify a target for the	How will you collect and	Add notes if you need to
(if any) will you track?	metric you have chosen	verify the data? E.g.	provide more context.

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report on your progress.	your project. Must be a number.	survey, interviews/case studies, focus groups, administrative data (e.g. case management data), observation/estimation, government or public dataset (e.g. Census), other datasets.	

Your Indicators

A metric is a measurement designed to indicate whether or not progress towards an outcome is occurring, and quantify the extent to which it is occurring.

You may add your own metrics here.

There are two types of metrics. An 'Outcome Metric' is a measurement designed to help you determine whether progress towards an outcome is occurring or not, and quantify the extent to which it is occurring. An 'Activity Metric' tells you how much of something you're doing or producing ('outputs' are often Activity Metrics, for example.)

Metrics work best when they:

- Are quantifiable/numeric
- Are clearly defined and succinct
- Contain all the context needed to gauge and compare the result (e.g. unit [e.g. cm, metres, people, people-days, %, etc]; direction of change [increase; decrease; etc.]; timeframe [e.g. per month; per year; etc])
- Have been tested, and/or are in common use, and/or are commonly understood as a relevant and useful indicator of performance in a particular arena
- Are used sparingly you are much better off to "ask one good question and answer it reliably" than try to track many things at once
- Relate to a clearly articulated outcome or activity.

Please Note: If any of your own indicators are similar to one of our Grants Program indicators, please select one of ours in the previous section rather than duplicating it here.

metric	Outcome/ Activity	Metric	9		Explanatory notes
		E.g. number of practitioners trained in restorative justice conferencing. One per row. Add more rows if you want to list additional metrics.		collect and	Add notes if you need to provide more context.

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people with increased legal capability').			

Qualitative evidence

Qualitative evidence is a descriptive rather than numeric form of evidence designed to indicate whether or not progress towards an outcome is occurring.

Examples of qualitative data sources include interviews, testimonials, focus group transcripts/summaries, social media posts, media appearances/mentions, and artistic or multimedia depictions such as photographs, videos and audio/podcasts.

Qualitative evidence	Explanatory notes
Select the type of qualitative evidence you will	Add notes if you need to provide more context.
use to help track your progress. One per row. Add	
more rows if you want to list additional types of	
qualitative evidence.	

Budget

* indicates a required field

Budget (GST exclusive)

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have applied for, whether it has been confirmed or not. All amounts should be GST exclusive.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns, Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'. Examples of expenses could include 'onsite power & water for 6 months', 'office supplies', 'part-time staffer x 40 hours'.

Use the 'Notes' column for any additional information you think we should be aware of.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT). Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

Please Note GST Exemption: In relation to the GST obligations of the Victorian Legal Services Board and future grant recipients, the Board has obtained a GST private binding ruling from the ATO which confirms that the payment of Project Grants will not be subject to GST. As a result, the payment of any Project Grants by the Board to future grant recipients will not give rise to any GST obligations for either party.

to successfully carry out this project?

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On this basis, please note the following:

- The Board will not "gross up" the grant payments for GST purposes as no GST will be payable by future grant recipients.
- Future grant recipients will not be required to remit any amounts in respect of GST to the ATO on the grant payments. That is, the full amount of the funding from the Board can be directed by future grant recipients towards their specified purpose.

If any of the line items above are subject to GST (such as any materials or services purchased from third party suppliers), then you should put the GST inclusive amount into the budget.

Income Description	Income Type	Confirmed Funding?	Income Amoun (\$)	t Notes
			\$	
			\$	1
			\$	
			\$	
			Must be a dollar amount.	
xpenditure Description	Expenditu	re Type Expen (\$)	diture AmountNo	tes
		\$		
		\$		
		\$		
		Must be	e a dollar amount.	
Budget Totals		Expenditure Amount *	Income - Expen	diture *
5	\$			
This number/amoun calculated.		number/amount is ulated.	This number/amount is calculated.	
	l your budget in	ı a different form	nat should you ch	oose.
Attach a file:	your buuget in	i a dillerent form	iat siloulu you til	oose.

Non-financial inputs could include staff/volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, and other types of support.	

Applicant Capacity

* indicates a required field

Referees

Your application must include contact details for two referees. They may be subject matter experts or partners who can strengthen the case for your approach or attest to your organisation's capacity to deliver. Please ensure you advise your referees that their details have been provided to us.

Referee 1 * ○ Individual ○ Organisation Organisation Name		Referee 2 * ○ Individual ○ Organisation Organisation Name				
Title	First Name	Last Name	Title	First Name	Last Name	
Title	I II SE INAITIE	Last Name	THE	Tilstivallie	Last Name	
Referee 1 Po	osition *		Referee 2 P	osition *		
Referee 1 Pr	imary Phone Number *		Referee 2 P	rimary Phone Numbe	r*	
Must be an Australian phone number.		Must be	Must be an Australian phone number.			
Referee 1 Pr	imary Email *		Referee 2 P	rimary Email *		
Must be a	an email address.		Must be	an email addres	S.	

Please provide a link to or attach a copy of your most recent Annual Report.

If you do not produce an annual report, please provide us with your most recent financial statements (may include a Profit and Loss Statement / Statement of Financial Performance and a Balance Sheet / Statement of Financial Position).

Upload files	Attach a file:			
	or			
Provide web link:				
Provide web link.	Must be a	URL		
Optional Letters of Suppo	rt			
You may wish to include Lette or partner organisations deta project. Please note that this Attach a file:	iling the	scale and nature	of their supp	oort for your
Letters of Support are optional. A ma	ximum of 2	Letters of Support n	nay be provided	
Certification and Feedba	ack			
* indicates a required field				
Certification				
This section must be completed to the applicant organisation (may be application form).				
I certify that to the best of my application are true and corre organisation is approved for tand conditions of the grant as	ect, and I this grant	understand that t, we will be requ	if the application if the application if the application is acceptable as a second contract of the application is a second con	ant
I agree *	○ Yes		○ No	
Name of authorised person *	Title	First Name	Last Name	
person		senior staff member, I volunteer	board member	or appropriately
Position *	Position he	eld in applicant organ	isation (e.g. CE0	D, Treasurer)
Contact phone number *	We may co	n Australian phone nu ontact you to verify t olicant organisation		ion is authorised

Contact Email *			
	Must be an email ad	dress.	
Date *			
	Must be a date		
Applicant Feedback			
You are nearing the end of the application click the SUBMIT button please t			
Please indicate how you found ○ Very easy ○ Easy	d the online appl	ication process: O Difficult	Very difficult
How many minutes in total di	d it take you to c	omplete this app	lication? *
Estimate in minutes i.e. 1 hour = 60			
Please provide us with your s additions to the application p			