#### About the grant

\* indicates a required field

The Aboriginal Languages Trust (ALT) is an Aboriginal-led NSW Government Agency established under the Aboriginal Languages Act 2017 (AL Act) to provide a focused, coordinated, and sustained effort in relation to NSW Aboriginal Languages activities at local, regional and State levels.

The ALT Educational Scholarship Program is funded by the Aboriginal Languages Trust to grow the number of Aboriginal Languages speakers, educators and teachers across NSW.

The purpose of the ALT Educational Scholarship Program is to revive, grow and nurture Aboriginal Languages across NSW by supporting individuals who are undertaking training or education related to learning or teaching Aboriginal Language.

In 2024-25 Financial Year **\$300,000** will be allocated to the ALT Educational Scholarship Program.

#### The ALT Education Scholarship Program has three tiers:

- Tier 1 Community Education and NSW TAFE level study \$1,000 \$9,999
- Tier 2 Undergraduate and Master's Scholarship \$10,000 \$24,999
- Tier 3 Research Scholarship \$25,000 \$50,000

Opening Date and time 9:00am 25 November 2024 Closing date and time 11:59pm 5 January 2025

The Trust recognises Communities are at different stages of their Language Revival journeys.

We want you to know, the Trust is here to support applicants.

#### Instructions for Applicants

The Aboriginal Language Trust encourages applicants to read all the details in these guidelines before applying. If you have any questions, please contact the ALT Community Investment Team on 1300 036 406 or via email on grants@alt.nsw.gov.au

<b>Application Number</b>	

This field is read only.

#### **Program Details**

#### **Aboriginal Languages Educational Scholarship Program**

This field is read only.
The program this submission is in.

#### Disclaimer

The Applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any project, and the Department expressly reserves its right to accept or reject this application at its discretion;
- it must bear the costs of preparing and submitting this application and the Department does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- it has read the Funding Guidelines for the Program and has fully informed itself of the relevant program requirements.

#### Use of Information

By submitting this application form, the Applicant acknowledges and agrees that:

- if this project application is successful, the relevant details of the project will be made public, including details such as the names of the organisation (Applicant) and any partnering organisation (state government agency or non-government organisation), project title, project description, location, anticipated time for completion and amount awarded;
- the Department will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-inconfidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the Government Information (Public Access) Act 2009 (NSW) (GIPA Act): and
- in some circumstances the Department may release information contained in this application form and other relevant information in relation to this application in response to a request lodged under the GIPA Act or otherwise as required or permitted by law.

#### Privacy Notice

#### Form Preview

By submitting this Application form, the Applicant acknowledges and agrees that:

- the Department is required to comply with the Privacy and Personal Information Protection Act 1998 (NSW) (the Privacy Act) and that any personal information (as defined by the Privacy Act) collected by the Department in relation to the program will be handled in accordance with the Privacy Act and its privacy policy (available at: https://www.dpc.nsw.gov.au/privacy);
- the information it provides to the Department in connection with this application will be collected and stored on a database and will only be used for the purposes for which it was collected (including, where necessary, being disclosed to other Government agencies in connection with the assessment of the merits of an application) or as otherwise permitted by the Privacy Act;
- it has taken steps to ensure that any person whose personal information (as defined by the Privacy Act) is included in this application has consented to the fact that the Department and other Government agencies may be supplied with that personal information, and has been made aware of the purposes for which it has been collected and may be used.

#### **Eligibility Confirmation**

#### Eligible applicants must meet each of the following criteria:

#### Tier 1: Community and TAFE Study Scholarship

- Identifies and is recognised by their Community as an Aboriginal person
- A NSW Resident\*
- Enrolled in an Aboriginal Language Course (or module(s)) at an ALT recognised Aboriginal Community Languages Organisation or NSW TAFE

#### Tier 2: Undergraduate and Master's Level Study Scholarship

- Identifies and is recognised by their Community as an Aboriginal person
- A NSW Resident\*
- Enrolled in an Aboriginal Language Course (or module(s)) at an ALT recognised Aboriginal Community Languages Organisation or NSW TAFE

#### Tier 3: Research Scholarship

- Identifies and is recognised by their Community as an Aboriginal person
- A NSW Resident\*
- Conflict of Interest Declaration
- Public Liability Insurance (of at least \$10 million)
- Enrolled in a PhD or Doctorate in NSW relating to Aboriginal Languages research OR

#### Form Preview

• Engaged by an ALT recognised Aboriginal Community Languages Organisation to undertake Aboriginal Languages research (for Community-led research projects – not delivered by a Tertiary Institution)

Note: \* Exception may be granted under special circumstances, where an applicant can demonstrate that the Language group area crosses State borders and/or the study/research will significantly benefit a NSW Languages group.

#### You are not eligible to apply if you:

- are a School, University, TAFE, or Adult Community Education Organisation;
- have already completed the course (the grant cannot be used to backpay completed studies); and/or
- have already completed the course/research (the grant cannot be used to backpay completed studies/research); and/or
- have been found to have provided false or misleading information in applying for previous grants through the ALT.

#### Please declare this application meets the Program eligibility criteria:

- It has been prepared by and is being submitted by an eligible applicant
- Project applications are specific to a Local Government Area
- Projects can commence no later than **1 July 2025** and be completed within **30 June 2027** of the funding deed commencing
- Projects can be operated and maintained beyond the funding period.
- Applicants will notify the Department if grant funding is secured from another source

outlined in the Program Guidelines *			
□ Yes			
Contact Details			

\* indicates a required field

**Applicant Details** 

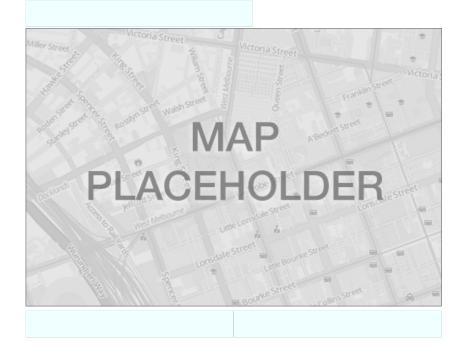
<b>Applicant *</b> ○ Individual Organisation Name		<ul><li>○ Organisation</li></ul>	
	5' . N		
Title	First Name	Last Name	

For organisations: please use the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Form Preview

#### **Applicant Primary Address**

Address



#### **Applicant Postal Address**

۸۸	Ы	ress
Au	u	1623

#### **Applicant Primary Phone Number \***

Must be an Australian phone number.
Country code not required, area code for landlines is required.

#### Applicant Email Address \*

Must be an email address.

#### **Applicant Website**

Must be a URL.

#### **Bank Details**

#### **Applicant Bank Account \***

Account Name

BSB Number Account Number
Must be a valid Australian bank account format.
Please provide a recent bank statement of the account you would use to receive
the grant funding if you are successful. * Attach a file:
You do not have to show transaction details, however, the statement must:
Be for an account in the name of the applicant
• Clearly show the BSB, account number, postal address, and name of the account holde
<ul> <li>Be a statement on financial institution letterhead</li> <li>Not be an online transaction list</li> </ul>
• Not be an offine transaction list
Primary Contact Details
Primary Contact *
Title First Name Last Name
This is the person we will correspond with about this grant.
Primary Contact Position *
e.g., Manager, Board Member or Fundraising Coordinator.
Primary Contact Phone Number *
Must be an Australian phone number.
Country code not required, area code for landlines is required.
Primary Contact Other Phone Number
Must be an Australian phone number. Country code not required, area code for landlines is required.
Primary Contact Email *
This is the address we will use to correspond with you about this grant.
Joint Applications
A to the second contact the seco
Is the applicant auspiced by another organisation for the purpose of this grant? *
<ul> <li>Yes</li> <li>No</li> </ul>

#### Form Preview

Goods & Services Tax (GST)

An auspice arrangement is when a larger, incorporated organisation assists a smaller, unincorporated organisation or individual to manage funding for a grant activity or event. The larger organisation is known as the auspice organisation. The community group, smaller organisation or individual is known as the grant recipient.

Organisation Details
* indicates a required field
Applicant Organisation Details
Please detail the primary activities of the applicant organisation. *
Word count: Must be no more than 200 words.
Does the applicant organisation have at least \$10 million in public liability insurance, or is willing to obtain \$10 million in public liability insurance? *
O No, but willing to obtain  Applicants are required to hold at least \$10 million public liability insurance in order to enter into a funding deed with the NSW Government.
Please provide evidence that the applicant organisation holds Public Liability Insurance. * Attach a file:
Applicants are required to hold at least \$20 million public liability insurance in order to enter into a funding deed with the NSW Government.
<b>Does the applicant organisation have an Australian Business Number (ABN)? *</b> O Yes  O No
O les
Applicant Organisation ABN *
The ADN provided will be used to leak up the following information. Click Leak up above to
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

### Form Preview

DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	
Must he an ARN	

Must be an ABN.

### **Auspice Organisation Details**

Auspice organisation name * Organisation Name	
Please use the organisations full name. Make sure documentation such as that with the ABR, ACNC or	you provide the same name that is listed in official or ATO.

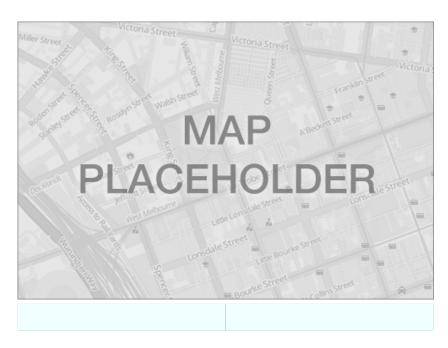
Auspice ABN \*

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		

Must be an ABN.

Auspice Primary Address				
Address				



<b>Primary</b>	<b>Contact Perso</b>	on at Auspice (	Organisation *
Title	First Name	Last Name	_

We may contact this person to verify that the auspice arrangement is valid and current.

#### Position \*

e.g., Manager, Board Member or Fundraising Coordinator.

#### **Phone Number \***

Must be an Australian phone number. Country code not required, area code for landlines is required.

#### **Email Address \***

Must be an email address

## Please attach a letter from the auspice organisation confirming that the auspice arrangement is valid and current. ${}^{\star}$

Attach a file:

The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

## Project/Event/Program Details

\* indicates a required field

Form Preview

#### Title \*

#### Word count:

Must be no more than 25 words.

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

#### **Brief description \***

#### Word count:

Must be no more than 50 words.

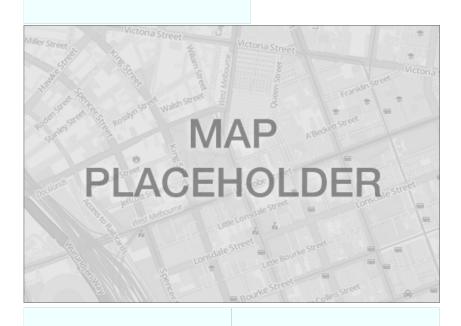
Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

#### Anticipated start date \*

#### Anticipated end date \*

#### **Primary location of your initiative**

Address



Any, but at least one field is required.

Primary location does not need to be a specific address, and can be postcode, suburb, state, etc If delivered online, please specify the area of focus for delivery.

#### Please update anticipated start/end date

You have indicated above that your project either starts before 24 January 2025 or after 30 June 2027, the timeframe for delivery under this Program. Please update the details to ensure your dates fit within these timeframes.

#### Project Milestones and Key Deliverables

Please detail the administrative stages or activities expected to be completed as part of the project.

Milestone and Deliverables	Expected start date	Expected end date	Explanatory notes
Please provide detail for one Milestone per row. e.g., Planning; recruitment; evaluation. Add more rows if you want to list additional milestones. Please include detail of all Deliverables that are part of the Milestone.	Must be a date.	Must be a date.	Add notes if you need to provide more context.

#### Key Project Personnel

Please provide information on the key personnel who will be responsible for the delivery of the project, including their qualifications and experience.

Please include only one person per row. Add more rows if you want to list additional personnel.

Name	Organisation	Role	CV/ Supporting document	Notes
One per row. Add more rows if you want to list additional key project personnel.				Please provide any further details.

#### **Project Focus**

There are three (3) tiers of funding provided under the ALT Educational Scholarship Programs (ESP) for post-secondary tertiary education:

#### Tier 1: Community and NSW TAFE Study Scholarship - \$1,000 - \$9,999

Attendance at an ALT recognised Community Aboriginal Languages Course or NSW TAFE Aboriginal Languages course, studying Aboriginal Languages.

Tier 2: Undergraduate and Master's Study Scholarship - \$10,000 - \$24,999

Form Preview

Attendance at a NSW University, undertaking Undergraduate or Masters level Language study (preferably including Aboriginal Language(s) and Culture modules). For example, undertaking a Master's in Education (Secondary) with elective course work and / or research modules in Aboriginal Languages or an Arts degree with a Major in Linguistics.

#### **Tier 3 Research Scholarship -** \$25,000 - \$50,000

Undertaking a research-based study, either at a NSW University as part of a PhD or Doctorate, or on behalf of an ALT recognised Aboriginal Community Languages Organisation, where the main focus of the research is strengthening the use and practice of Aboriginal Languages within NSW Aboriginal Communities, whilst valuing Aboriginal ways of knowing, being and doing and ensuring Community has sovereignty over Language research outcomes. (For example, undertaking a PhD with a focus on how to improve the wider user and adoption of Aboriginal Language through changes to Education practices and Curriculum).

Please note that each Tier requires additional supporting material listed below.				
Identify which ESP tier you applying for?  ☐ Tier 1 Community and NSW TAFE Study Scholarship ☐ Tier 2 Undergraduate and Master's Study Scholarship ☐ Tier 3 Research Scholarship No more than 1 choice may be selected.				
Please provide a short rationale for your	r project. *			
Word count:				
Must be no more than 200 words. Explain why your initiative is needed, and why you believe the activities you propose will produce the outcomes you seek.				
Risks and Dependencies				
Please detail any risks or uncertainties in the delivery of the project, and how each of these will be managed.				
Please include only one risk or dependency per row. Add more rows if you want to list additional risks or dependencies.				
Risk or dependency description	How the risk or dependency will be managed			
For example, you may require approval, have stretched resources, or time constraints for delivery.	You should provide an explanation of how you will prevent or treat the risk or dependency.			
Community Support				
Does this project have community suppo	ort? *			
○ Yes ○ No ○ Not Applicable				
Evidence of community support is generally highly regarded as projects with community buy-in tend to be more successful.				

Please provide explanation of your answer above, and detail any evidence of community support, if available. *
Community Support Letters can be uploaded in section 8 of this application.
Merit Criteria
Which Aboriginal Country will your project be delivered on?
Which NSW Aboriginal Language/s will benefit from your project?
Explain how your study will support the learning, use, strengthening, and/or teaching of Aboriginal Languagae.
(if this is not clearly identifiable in your course detail/course handbook under Required Supporting Documentation)
How will the expected outcomes and deliverables promote Community governance, use and practice of Language development, teaching and Knwoledge sharing?
(such as resources for schools and Community groups, new ways of teaching etc).
Please provide a statement from ALT recognised Aboriginal Community Languages Organisation, that this research is part of their Community Language Plan/supports the aspirations for their Community Language, including a description of how.  Attach a file:
How do you propose to publish the research? Please include a description of how the research outcomes will be made accessible and available for use by NSW

**Languages Communities** 

How will the research benefit	t NSW Aboriginal Languages Communities?			
Explain which Language(s) your research will focus on, and how your research will help increase the number and strength of Language speakers in this group, and/or for NSW Aboriginal Languages more broadly?				
Explain how your studies will knowing, being and doing?	l decolonise academia and value Aboriginal ways of			
Budget				
* indicates a required field				
Total Project Cost *	\$ What is the total budgeted cost (dollars) of your project?			
Total Amount Requested *	\$ What is the total financial support you are requesting under this grant?			
Expenditure				
Please include all expenditure its review the Guideline for what fur	ems that you are seeking to fund under the grant and nding can be used for.			
(Please note some items may at your Budget)	tract GST and this should be considered when completing			
Amount Budgeted	\$ Must be a dollar amount.			

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Expenditure description *	
Expenditure type *	
Notes	
Budget Totals	
Total Expenditure Amount	

#### **Outcomes**

This number/amount is calculated.

#### **Outcomes**

Please tell us about the outcomes you expect to result from your project. 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)

Your outcomes	intended outcome link to the Program outcomes?	Explanatory notes	
What changes do you expect will occur as a result of your project (e.g. Enhanced physical fitness)? Please be brief. One per row.	Please explain how your intended outcome helps contribute to the Program Outcomes.	Add notes if you need to provide more context.	

### **Supporting Documentation**

Required Supporting documentation

<sup>\*</sup> indicates a required field

#### Form Preview

Review the below to ensure you have provided the required supporting documentation throughout the application or as an attachment here.

#### Tier 1 (\$1,000 to \$9,999 Tier 2 (\$10,000 - \$24,999Tier 3 (\$25,000 - \$50,000 per year) **Required supporting** documents:

- Proof of Aboriginality
- Proof of Residence
  - Copy of Drivers Licence and
  - Copy of Bank Statement **OR** copy of a utility bill.
- Proof of Enrolment
  - Statement of acceptance and enrolment (from ALT recognised **Aboriginal** Community Languages Organisation, or NSW TAFE) confirming courses and modules enrolled in, when and where.
  - Course details (from course handbook or similar including details on duration, modules, outcomes. etc.).
  - Confirmation of any course or study material costs (from teaching organisation).
  - Confirmation of any additional costs associated with participating in the study i.e. travel, technology, etc. (applicant budget).

#### per year) Required supporting documents:

- Proof of Aboriginality
- Proof of Residence
  - Copy of Drivers Licence and
  - Copy of Bank Statement **OR** copy of a utility bill.
- Proof of Enrolment
  - Statement of acceptance and enrolment (from University), confirming courses and modules enrolled in, when and where.
  - Course details (from course handbook (can be electronic link) or similar including details on duration, modules, competencies, study requirements, qualifications, outcomes. etc.).
  - Statement (by applicant) explaining how your study will support the learning, use, strengthening, and/or teaching of Aboriginal Language, where this is not clearly identifiable in the course detail.
  - Confirmation of any course or study material costs (from University).

#### per year) **Required supporting** documents:

- Proof of Aboriginality
- Proof of Residence
  - Copy of Drivers Licence and
  - Copy of Bank Statement **OR** copy of a utility bill.
- Proof of Enrolment
  - Statement of enrolment (from University), confirming when and where.
  - Proof of Acceptance (from University) of research question relating to Aboriginal Languages.
  - Research and Study Plan (approved by University) with milestones, any courses to be completed and expected outcomes/metrics.
  - Confirmation of PhD or Doctorate Supervisor, and if required Committee.
  - Confirmation that research outcomes will be published, and free to access, use and implement by the Aboriginal Languages Community.

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 Confirmation of any additional costs associated with participating in the study i.e. travel, technology, etc. (applicant budget).

- PhD or Doctorate research details (from course handbook (can be electronic link) or similar including details on duration, modules, competencies, study requirements, qualifications, outcomes. etc.)
- Confirmation of any costs (from University).
- Details of any additional costs associated with participating in the study i.e. travel, technology, etc. (budget).**OR**
- Statement from ALT recognised Aboriginal Community Languages Organisation confirming:
  - Community Language Plan (clearly showing how the research fits)
  - research question to be answered
  - research to be undertaken
  - who will the research go
  - who will accept the research outcomes

Form Preview

- who will oversee the research
- any associated costs (budget)
- duration of research details on key research team members (CVs)
- Declaration by the applicant that there is / is not any known actual or perceived conflicts of interest with ALT staff, Executives or Board Members.
- Evidence of public liability insurance \$10,000,000.

#### Required Supporting documentation upload.

**Please note** each Tier requires additional supporting material listed above. Upload the relevant supporting documentation relevant as previously identified in your application.

<b>Upload supporting documentation *</b> Attach a file:				

#### Declaration and Authorisation

\* indicates a required field

#### Declaration

The Applicant represents and warrants that this application has been submitted by an authorised representative of the Applicant (e.g. CEO, Chief Financial Officer, General Manager, Director, Chair of the Board, President, authorised manager etc).

Where this Application is submitted in the course of employment by a representative of any kind (e.g. authorised representative or agent) of the Applicant, you: (i) acknowledge and agree that the Applicant is deemed to be jointly and separately bound by this application; and (ii) represent and warrant that you have the authority to represent and bind the Applicant as contemplated by this provision.

By submitting this application form I hereby declare that:

• I agree for my project to be automatically considered in other NSW funding programs;

#### Form Preview

- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge;
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application;
- I am authorised to submit this application on behalf of, and have the authority to represent and bind the Applicant;
- I understand that any false declaration may render this application ineligible/invalid; and
- All relevant conflicts of interest have been declared

#### Authorisation

l agree *	□ Yes			
Name of authorised person *		First Name a senior staff member	Last Name , board member or	appropriately
Position *  Position held in applicant organisation (e.g. CEO, Treasurer)				Freasurer)
Phone number *  Must be an Australian phone number.  We may contact you to verify that thi by the applicant organisation				is authorised
Email *	Must be	an email address.		
Applicant Feedback				
You are nearing the end of the click the <b>SUBMIT</b> button pleas				
How did you find the online  ○ Very easy ○ Easy			fficult O V	ery difficult
How many minutes in total	did it take	e you to complete	this application	1?
Estimate in minutes i.e. 1 hour 60				

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider			