



Australian Government
Organ and Tissue Authority



DonateLife Partnership Program

2021 Funding Round – Application Form

Completed application with all necessary attachments should be emailed to grants@donatelife.gov.au prior to the closing date and time of 17:00 pm AEDST (Canberra time) on Sunday 7 March 2021.

This application form must be completed in conjunction with and having read the 2021 DonateLife Partnership Grant Opportunity Guidelines.

The application form includes word limits. Your application will not be considered if you go over the word limit. The word limit does not include attachments to the application (see section 7.1 of the 2021 DonateLife Partnership Grant Opportunity Guidelines).

There will be a two-step assessment process:

1. We will shortlist applications that are of excellent or good quality against all assessment criteria, in line with the 5-Point numerical scoring scale (see section 8.1 Table 2 of the 2021 DonateLife Partnership Grant Opportunity Guidelines).
2. Shortlisted applications will be invited to present or “pitch” their partnership proposal to the assessment committee and the delegate. Presentations will then be assessed in line with the 5-Point numerical scoring scale (see section 8.1 Table 2 of the 2021 DonateLife Partnership Grant Opportunity Guidelines).

A. Project details

Organisation name	
Project title (no more than 10 words)	
Funding amount sought	\$ (whole dollars, GST exclusive)
Project summary (no more than six lines, focus on the purpose of the project)	
Project start date	
Project end date	

This project proposal is for (please cross relevant boxes):

- Community events and/or innovative digital engagement activities during DonateLife Week 2021 (Sunday 25 July to Sunday 1 August 2021 and the period is July and August 2021).

And / Or

- Community events and/or innovative digital engagement activities outside of the DonateLife Week 2021 period.

Are there any confidentiality issues which you consider to be detrimental to your organisation if details of this funding arrangement were reported on the Organ and Tissue Authority's website in accordance with the reporting requirements of the Commonwealth Grant Guidelines?

- Yes No

If yes please provide an explanation below:

B. Applicant details and project team

Principal contact

Title	
First Name	
Last Name	
Organisation	
Position	
Postal Address	
Postcode	
Phone	
Email	

Project Personnel

Name and position	Project role and responsibilities of each project officer, including summary of their relevant work experience.

Project Partners

Will your organisation partner with any other organisations? If so, provide details including their role in delivery of the project.

You must include a letter of confirmation for any identified project partners with this application.

C. Eligibility requirements

<p>Is your organisation one of the following:</p>	<p><input type="checkbox"/> Non-government organisation</p> <p><input type="checkbox"/> Professional body</p>
<p>Do you or your consortia organisation have any outstanding reporting requirements (acquittals, evaluations and audited financial statements) for any previous OTA grants?</p>	<p><input type="checkbox"/> Yes, provide details below</p> <p><input type="checkbox"/> No</p>
<p>Is your organisation financially viable?</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>Is your proposal <u>Not</u> for Profit?</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>Does your organisation have the required levels of insurance?</p>	<p><input type="checkbox"/> Yes – attach insurance statements to application</p> <p><input type="checkbox"/> No – provide a statement below that you are willing to obtain required insurance if successful in this funding round</p>

D. Organisation that will manage funds

Organisation name	
Legal status	<input type="checkbox"/> Australian Public Company <input type="checkbox"/> Incorporated trustee on behalf of a trust <input type="checkbox"/> Incorporated association <input type="checkbox"/> [Registered charity or] not-for-profit organisation <input type="checkbox"/> Australian local government body <input type="checkbox"/> Australian state or territory government body <input type="checkbox"/> Aboriginal and/or Torres Strait Islander Corporation registered under the <i>Corporations (Aboriginal and /or Torres Strait Islander) Act 2006</i> <input type="checkbox"/> Other, please specify _____ <input type="checkbox"/> None
Other registrations	<input type="checkbox"/> Charitable Institution <input type="checkbox"/> Deductible Gift Recipient <input type="checkbox"/> Health Promotion Charity <input type="checkbox"/> Public Benevolent Institution <input type="checkbox"/> Other, please specify _____ <input type="checkbox"/> None
ABN	
GST registered?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Principal/CEO or equivalent official head of organisation	Title: First Name: Last Name: Position:
Phone	
Email	
Postal address	
Registered street address (if different to postal address)	

E. Assessment Criteria

Note: Please refer to the focus and criteria identified within the DonateLife Partnership Grant Guidelines when completing your application.

Following assessment against the below criterion, an assessment committee will review and shortlist applications which have been assessed as excellent or good on its merits. The committee will invite shortlisted applicants to pitch their partnership proposal to the assessment committee and delegate. Presentations will then be assessed in line with the 5-Point numerical scoring scale.

Criteria one: Strategic community engagement and education opportunities (up to 500 words)

In addressing this criterion, strong responses will:

- outline your strategic approach, key deliverables and opportunities for collaboration with DonateLife, addressing how you will raise long-lasting community awareness about organ and tissue donation, the importance of registering to be a donor, and discussing your wishes with your family
- demonstrate how you will monitor your activities and adjust your approach to maximise strategic opportunities as they arise

Criteria two: Demonstrated ability to reach target audience groups (up to 500 words)

In addressing this criterion, strong responses will:

- outline how your key deliverables will reach one or more of the outlined target audience group/s
- describe your understanding of target audience group/s (e.g. motivations, behaviour, channels) and why your organisation is well suited to promoting organ and tissue donation

Criteria three: Value for money (up to 500 words)

In addressing this criterion, strong responses will:

- describe how your grant activities represents value for money
- outline your key performance indicators and describe how you will measure partnership success

Criteria four: Capacity and capability of organisation (up to 500 words)

In addressing this criterion, strong responses will:

- outline your organisations capability to deliver a collaborative and ongoing partnership; including reference to prior experience, resources, skills, expertise and project management
- demonstrate your organisation's prior experience in successful partnerships and interest in organ and tissue donation

Risk Management	
Please identify any potential risks or sensitivities, including actual or potential conflicts of interest associated with the project and how these will be managed.	
Potential risk or conflict	Management of the risk

Grant acknowledgement
<p>I have read the Organ and Tissue Authority’s DonateLife Partnership Grant Opportunity Guidelines and the Acknowledgement Guidelines</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>I confirm that our organisation will comply with the requirements for acknowledgement as specified in Section 12.6 - Acknowledgement of the DonateLife Partnership Grant Opportunity Guidelines and the Acknowledgement Guidelines</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>I understand that a minimum of five working days should be provided to the Organ and Tissue Authority for approval of all project material produced under this project and that this is our organisation’s responsibility.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

F. Project budget

The project budget must be realistic and detailed. It must clearly outline the main components of the project.

When completing the budget:

1. Clearly state all proposed costs for your proposal in this table.
2. Include the itemised breakdown for major items of administration costs, equipment and/or materials for which you are seeking funding.
3. Financial or in kind contributions to be provided by the applicant or via other contributions must be clearly identified and supported where possible through letters of support from other contributors.

Table 1 - DonateLife Partnership Program Expenditure	
Use whole dollars only (GST exc.)	Activity (Itemise all expenditure in as much detail as possible)
\$	
\$	
\$	
\$	
\$	
\$	Total A

Table 2 - Other Funding Sources Expenditure	
Use whole dollars only (GST exc.)	Activity (Itemise all expenditure in as much detail as possible)
\$	
\$	
\$	
\$	
\$	Total B

Grand Total Project Expenditure (GST exc.): \$	(total A + B)
(Must equal DonateLife Partnership Program Expenditure and Other Funding Sources Expenditure totals)	

Table 3 – In kind support		
Provide details of any in kind support contributing to this project		
Amount (GST exc.)	Provider	Description
\$		
\$		
\$		
\$	Total	

Table 4 –Previous funding details		
Please complete if your organisation has previously received funding from the DonateLife Partnership Grants Program.		
Project title and date	Amount funded through DonateLife Partnerships Program	Amount funded through other funding sources

Please provide details of any previous failures by the organisation to adhere to grant requirements or occasions when the organisation has had allocated funding withdrawn.

Not Applicable

Date	Details

G. Additional Information

Is there any other information that may support your application?

H. Privacy and Freedom of Information and Declaration

Full lists of grant recipients will be published on the GrantConnect and the Organ and Tissue Authority's website. We may also publicise grant recipients in other publications. If your organisation is successful in obtaining a grant, the organisation will be required to acknowledge the support of the Organ and Tissue Authority in all related organisational publicity.

In accordance with *the Freedom of Information Act 1992*, any information held by the Organ and Tissue Authority, including your application is accessible by you. Whilst the information you present to us is treated as confidential, staff and individuals who help us to assess and monitor grants may see it. The information you supply may also be made available to those assessing any other grant applications that your organisation makes.

Data held in the Organ and Tissue Authority's system may be used for statistical reporting, application assessment, media inquiries, accounting purposes and for contacting you. The details of all successful grants will be public information. However, any personal details will only be accessible by our staff, appointed auditors and individuals or organisations that may help us assess or monitor grants.

If you are successful in gaining funding from the DonateLife Partnership Program you need to recognise that there are certain expectations such as financial accountability, public liability insurance requirements and evaluation and monitoring requirements.

Declaration by Principal / CEO / or equivalent official head of organisation (or of consortia organisation)

I, the undersigned on behalf of the organisation listed below, certify that:

1. I have read the DonateLife Partnership Program Guidelines.
2. The information in this application is true to the best of my knowledge and any supporting material is my own work or the work of employees of the organisation.
3. All of the information provided in this application and any attachments is true and correct.
4. I am aware that action may be taken to recover any grant payment made where information provided in this application is subsequently found to be false or misleading or where the grant received is not used entirely for the purpose(s) for which it is approved.
5. I understand the staff of the Organ and Tissue Authority may contact other government agencies in relation to this application.
6. I have read and understand the section on Privacy and Freedom of Information and accept these terms.

Signature

Signature (from consortia organisation, if applicable)

Date

Date

Printed name

Printed name

Organisation

Consortia organisation

Position in organisation

Position in consortia organisation

Application checklist	YES	NO	N/A
We have read the DONATELIFE PARTNERSHIP GUIDELINES			
We have read the DONATELIFE PARTNERSHIP ACKNOWLEDGEMENT GUIDELINES			
We have read the sample FUNDING AGREEMENT			
All sections of the APPLICATION FORM have been answered			
The BUDGET has been completed according to the template provided			
PREVIOUS FUNDING DETAILS have been provided			
The DECLARATION has been signed by the Principal / CEO / or equivalent official head of organisation			
We have attached copies as listed under INSURANCE REQUIREMENTS (as applicable):			
<ul style="list-style-type: none"> • Workers' compensation insurance 			
<ul style="list-style-type: none"> • Public Liability insurance (\$10 million) 			
<ul style="list-style-type: none"> • Professional Indemnity insurance (\$1 million) 			
We have attached a list of other sources approached or intended for further funding			
All supporting material is labelled with our details			
We have kept a copy of the application for our records			
A hard copy AND electronic copy (Word format) have been provided. Note – a pdf of the signed declaration can be provided.			