



NSW Environmental Trust's Protecting our Places Program

2020 Application Form

Closing date: **3pm Monday, 16 March 2020**

Application summary

Applicant organisation	<input type="text"/>
Project title (limited to 100 characters including spaces)	<input type="text"/>
Funding requested	<input type="text"/>

Important information

- The Program Guidelines and Application Guide can be found on the [Trust website](#) under 'Guidelines and application forms'.
- It is **highly recommended** that you read the 2020 Protecting our Places (POP) [Program Guidelines](#) to ensure you understand and agree to adhere to the recent changes to the program.
- To complete this form, you **must have the latest Adobe Acrobat Reader** (Adobe Reader XI) installed. Please visit the [Adobe website](#) to ensure you have the latest version.
- **Do not use Acrobat Pro** – it will not save the data that you have entered. **DO NOT** copy and paste your answers from Word, as it will not save properly.
- The form will need to be saved each time it is closed. Once details are complete, save your final application and send as an email attachment.
- Answer every question. Where a question does not apply to your proposal, write 'not applicable' or preferably briefly explain why. This form is set in length and text boxes will not expand.
- Maps should to be provided (see [Application Guide](#) 'Attachments' page 26) however any additional attachments should not be included unless they are considered essential.

Read and comply with Section J of this application form before emailing your application and attachments to apply@environmentaltrust.nsw.gov.au by the closing date: **3pm Monday 16 March 2020**.

Enquiries

NSW Environmental Trust
Telephone (02) 8837 6093
Email: info@environmentaltrust.nsw.gov.au

Part A: Registration

Refer to section **Application form – Part A: Registration** of the [Application Guide](#).

A1 Applicant details			
Organisation	<input type="text"/>		
ABN	<input type="text"/>	Registered for GST	<input type="checkbox"/> No <input type="checkbox"/> Yes
Postal Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Post code	<input type="text"/>

A2 What is the legal status of your organisation?

Select **one** only.

- NSW Local Aboriginal Land Council
- NSW Registered Native Title Body Corporate. Indigenous Corporation Number:
- Aboriginal non-profit incorporated organisation. Indigenous Corporation Number:
- NSW Incorporated Association*. Incorporation Number:
- A non-distributing NSW Co-operative*. Co-operative Registration Number:
- Unincorporated Aboriginal organisation/group supported by an Administrator*
- Other (please detail)

* If you are an Association or Co-operative you will need to provide a copy (as an attachment to your application) of your organisation’s objectives/mission statement confirming the organisation’s activities seek to provide benefits for and participation from Aboriginal people and communities – see **Eligibility** section of the [Program Guidelines](#) for more information.

If you are a community group that is not incorporated, you must nominate a suitable organisation to administer your grant on your behalf – see **Eligibility** section of the [Program Guidelines](#) for more information and fill in the administrator details at section A4.

A3 Applicant’s primary contact			
Title	<input type="text"/>	First name	<input type="text"/>
		Surname	<input type="text"/>
Position	<input type="text"/>		
Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		

A4 Administrator details (if applicable)

Organisation	<input type="text"/>		
ABN	<input type="text"/>	Registered for GST	<input type="checkbox"/> No <input type="checkbox"/> Yes
ICN (if applicable)	<input type="text"/>		
Postal Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Post code	<input type="text"/>
Title	<input type="text"/>	First name	<input type="text"/>
		Surname	<input type="text"/>
Position	<input type="text"/>		
Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		

Part B: Project description and justification

Criteria 1: Tangible environmental outcome

B1 Project title (maximum of 100 characters including spaces)

B2 Project description – a brief description what you want this project to achieve

B3 Project location - where will the project take place?

Local Aboriginal Land Council What is my LALC area?

Local Land Services region What is my LLS area?

Local Government Area What is my local council?

State electorate What is my state electorate?

Provide location information for your project. Decimal degrees can be determined by accessing [Google maps](#), navigating to your project site and right-clicking on 'What's here?'

Latitude (decimal degrees) **Longitude** (decimal degrees)

Who owns the land where the proposed work will take place?

Do they/have they given permission to undertake the proposed works on the site?

Do you have approval/permission to undertake works on the site? Yes No

B4 Project timeframes – your project is to start from 1 August 2020*

Stage 1: Planning period
(Must be between 6 and 12 months – e.g. 01/08/2020 and 01/02/2021)

Proposed commencement date Proposed completion date

Stage 2: Implementation period
(Must be between 18 and 24 months and commence immediately after Stage 1: Planning)

Proposed commencement date Proposed completion date

* The 1 August 2020 start date is to accommodate the support workshops which are expected to commence from late August 2020.

Project justification

Refer to **Part B: Project Description and Justification** of the [Application Guide](#).

B5 What is the issue or problem you want to address?

B6 How do you know this is an issue or problem?

B7 What do you hope to achieve?
(i.e. what outcomes or results do you want to achieve? Relates to Part C1)

B8 What studies, reports, assessments or plans exist for the site and/or the environmental issue? Please briefly explain how your project will address this issue/s

Study, report, assessment or plan	When and who produced the document	Describe which component of the document your project relates to and how it will attempt to address the issue and/or meet a target.

B9 Is this project part of a larger, on-going program?

No Yes If yes, briefly explain the linkages between this project and your overarching program.

B10 Please explain how this environmental issue, or the activities proposed, are not the core business or the legal responsibility of any person or organisation involved in the project

Part C: Project Implementation Plan

Criteria 2: Project activities and outcome

C1. Application Project Implementation Plan (refer to Part C: Project Implementation Plan of the [Application Guide](#)).

Project start date:

(Designated as the start of Year 1 Quarter 1)

Important note: Grey boxes are mandatory activities and cannot be changed. See section **Grantee Support – Capacity Building** of [Program Guidelines](#) for details of support workshops.

Outcome 1	By the end of the project our organisation's capacity to successfully manage and deliver projects has improved	Stage 1 Planning				Stage 2 Implementation							
		Year 1				Year 2				Year 3			
Activity	Activity Description	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1.1	Develop Plan, including stakeholder map and communication strategy, to disseminate project information												
1.2	Communicate with stakeholders and obtain necessary approval of and commitment to project plan												
1.3	Obtain required permits, licenses, permissions/approvals including MOUs or partnership agreements												
1.4	Commence recruitment process for volunteers and/or contractors, including seeking quotes for materials and goods												
Mandatory Activities (1.5 – 1.8)													
1.5a	Organisational capacity building	Identify key project personnel to attend and participate in capacity building workshops	X										
1.5b	Organisational capacity building	Identify key skills required to deliver the project and conduct/arrange training if required		X	X								
1.6a	Project Implementation Plan (PIP)	Finalise PIP for Stage 2: Implementation				X							
1.6b	Stage 2: Project Budget	Finalise your budget for Stage 2: Implementation				X							
1.7a	Annual Project Evaluation	Review your project progress against performance indicators							X				
1.7b	Project Refinement	Determine any changes required in the workplan for the next year's project implementation							X				
1.7c	Annual progress reporting	Write and submit the annual Progress Report to the Trust							X				

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1.8a	Final Financial reporting	Organise an independently audited financial statement for the project												X
1.8b	Final reporting	Write and submit the Final Report to the Trust												X
Outcome 2			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
2.1														
2.2														
2.3														
2.4														
2.5														
2.6														
2.7														
2.8														
2.9														
2.10														
2.11														
2.12														

C2 Attach an A4 sized map as 'Attachment 1' that clearly defines your project location

Map attached Yes No (if no, please address this before submitting your application)

C3 What permits/licenses/approvals might you need to undertake your project?

These will need to finalise as part of your Stage 1 – Planning activities

C4 Is the protection of a specific threatened species the primary focus of your project?

No Yes If Yes, list the species you are focussing on in your project, in priority order.

For assistance go to [Saving our Species Threatened Species profile search](#) page or the [DPIE Threatened Species web site](#).

No.	Common name	Scientific name	NSW conservation status

C5 Will your project be carried out in an endangered ecological community (EEC)?

No Yes If Yes, list the EECs impacted by your project and how you found out about them (e.g. plan of management, DPIE mapping).

Please use the [Bionet Atlas](#) information page. Further instructions on how to locate EECs near your project, is outlined under **Part C: Project Implementation Plan – Question C5** of the [Application Guide](#).

C6 What will you do to maintain the project outcomes after this funding finishes? Who will be involved? What long-term benefits or flow-on effects will result from your project?

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C7 What are some of the potential risks for your project and how will you manage them?

Stage 1: Planning

Risk factor	How will risk be managed?

Stage 2: Implementation

Risk factor	How will risk be managed?

Section D: Project Delivery

Criterion 3: Capacity to deliver

Refer to **Part D: Project delivery** of the [Application Guide](#).

D1 Who helped you to plan and develop this application?	
Who was involved?	What was their involvement?

D2 Collaborators			
List at least four key people who will work with you to deliver this project and their roles and responsibilities. Others may be identified during the Planning stage.			
Name, position and group/organisation	Reason for involvement	Intended role in project design and delivery	Confirmed Yes/No

D3 Has this application been endorsed by your organisation's governing body/board?

No Yes Either provide a letter of support or an explanation as to why endorsement has not yet been received.

D4 Previous experience

Briefly outline the previous experience held by your organisation in undertaking projects of a similar nature to the one proposed in this application.

D5 Is the Trust is being asked to fund an existing employee? i.e. is the work they will be undertaking a part of their usual duties?

D6 Please declare any real, potential or perceived conflict of interest

This can relate to land ownership, salary and/or contractor payments.

Section E: Indicative project budget

Criterion 4: Value for money

Refer to **Part E: Indicative project budget** of the Application Guide.

E1 Please provide an indicative budget breakdown of the funding you are seeking

Stage 1 – Planning

Do not use any commas

Expenditure item	Estimated \$

(Maximum \$10,000)

Total	\$
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Stage 2 – Implementation

Do not use any commas

Expenditure item	Estimated \$
Mandatory independently audited financial statement	

(Maximum \$50,000)

Total	\$
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E2 What is your indicative co-contribution (cash and in-kind)?		
Summary of co-contribution		Estimated value \$
Cash		
Cash		
Cash		
Cash		
In-kind		
In-kind		
In-kind		
In-kind		
Total		

Section F: Organisational background

F1 How does your organisation function?

How does your organisation make decisions?
(e.g. board, committee, quorum of members, director)

Office bearers	President/Chair/CEO	
	Treasurer/CFO	

Number of years trading

Number of full-time employees

Number of part-time employees

If you are a membership based organisation, approximately how many members do you have?

F2 Insurance

It is a condition of your grant that you have adequate insurance cover including public liability insurance of \$10 million (minimum), workers' compensation and volunteer insurance. Please provide details of your insurance below:

	Public liability	Workers' Compensation	Volunteer
Company			
Policy numbers			
Coverage			
Currency (expiry date)			

F3 Has your organisation previously received Environmental Trust funding?

No Yes If yes, please provide reference numbers and/or project title

Program	Reference number	Project name	Amount \$	Status

F4 Has your organisation received grant funding for this project site from a body other than the Trust?

No Yes If yes, please provide details

Funding source	Year	Amount	Status

Section G: Referees

Refer to **Part G: Referees** of the [Application Guide](#).

Please provide details of two referees outside of your organisation who we can talk to about your organisation and your project.

Referee 1

Name

Title/Position

Organisation

Email

Phone Mobile

Referee 2

Name

Title/Position

Organisation

Email

Phone Mobile

Section H: Authorisation

Refer to **Part H: Authorisation** of the [Application Guide](#).

APPLICANT

Include the details of an office-bearer in your organisation (e.g. General Manager, Chairperson, CEO or Executive Officer) who can confirm the accuracy of the information within the application and can commit your organisation to undertake the project if funded. This person will be a secondary contact for the project if required.

Name	<input type="text"/>	
Title/Position	<input type="text"/>	
Organisation	<input type="text"/>	
Email	<input type="text"/>	
Phone	<input type="text"/>	Mobile <input type="text"/>

ADMINISTRATOR (if applicable)

Include the details of an office-bearer in the organisation acting as the Administrator (e.g. General Manager, Chairperson, COE or Executive Officer) who can confirm the accuracy of the information within the application and can commit the organisation to undertake the project if funded. This person will be a contact for the project if required.

Name	<input type="text"/>	
Title/Position	<input type="text"/>	
Organisation	<input type="text"/>	
Email	<input type="text"/>	
Phone	<input type="text"/>	Mobile <input type="text"/>

Section I: Application evaluation

Please provide some basic feedback on your experience with applying to the Protecting Our Places program. All feedback will be collated to provide overall picture and used to assist development of future Environmental Trust documentation.

1. Where did you hear about the program?

- | | | |
|---|---|--|
| <input type="checkbox"/> Newspaper advert | <input type="checkbox"/> Email from the Trust | <input type="checkbox"/> Trust website |
| <input type="checkbox"/> Web search | <input type="checkbox"/> Colleague or other contact | <input type="checkbox"/> Specialist/professional network |
| <input type="checkbox"/> Other | | |

2. Time taken to develop your project (including negotiations with collaborators)

- | | | | |
|--|-------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Less than 5 hours | <input type="checkbox"/> 5–20 hours | <input type="checkbox"/> 20–40 hours | <input type="checkbox"/> More than 40 hours |
|--|-------------------------------------|--------------------------------------|---|

3. Time taken to complete the application form

- | | | | |
|--|------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Less than 2 hours | <input type="checkbox"/> 2–5 hours | <input type="checkbox"/> 5–10 hours | <input type="checkbox"/> More than 10 hours |
|--|------------------------------------|-------------------------------------|---|

4. Difficulty completing the application

- | | | | | |
|------------------------------------|-------------------------------|-----------------------------------|------------------------------------|---|
| <input type="checkbox"/> Very easy | <input type="checkbox"/> Easy | <input type="checkbox"/> Moderate | <input type="checkbox"/> Difficult | <input type="checkbox"/> Very difficult |
|------------------------------------|-------------------------------|-----------------------------------|------------------------------------|---|

Section J: Application submission

Use the following checklist to make sure that your application is complete and accurately represents your project. You should have read the [Program Guidelines](#) and [Application Guide](#) to make sure your application is consistent with the program objectives and rules, particularly those sections covering the eligibility and assessment criteria.

Is your application complete?

- Answer all questions in the application form
- Do not copy and paste your answers from a Word document as your application will not save properly
- Type only in the spaces provided in the form. The boxes provided for answers to questions are a set size; the boxes should not expand to accommodate additional text if you continue to type beyond the bottom of the text box. Text that is not visible in the text box will not be considered.
- Attach an A4-size project location map (including a scale) as Attachment 1
- Attach an A4-size site map (including a scale) as Attachment 2
- Have your application authorised by the appropriately authorised person
- Name your Application Form as: Organisation Name – POP Application
- Submit your entire application by Email. Postal or faxed submissions will not be accepted
- Only submit one application per email. Email subject line must be: Organisation Name - POP Application
- If you are submitting two applications, number them accordingly. (i.e. 1 or 2)
- Do not ZIP your application documents. ZIP files will not be accepted by the Trust
- Application forms must be sent as the PDF Smart Form, using Adobe Acrobat Reader (Adobe Reader XI).

Email to: apply@environmentaltrust.nsw.gov.au

Closing Date: **3pm Monday, 16 March 2020**

Applications that are late, incomplete or ineligible will not be considered.