About the Grant Program

Instructions for Applicants

Please complete this form to submit an application for funding under the **Healing at Home on Country, Aboriginal Elders & Mentors Grant Program**. Before starting the application, please read the **PROGRAM GUIDELINES** and **Healing at Home Grant Guide** to ensure all requirements are clear.

Please Note:

- Eligibility and submission of an application does not guarantee funding.
- This grant is one-off funding with a fixed 12 months term ending **30 September 2027.**
- Grant funding must be spent within 12 months of an executed Grant Funding Agreement.
- Successful applicants will be required to submit a Final Report and Acquittal in SmartyGrants no later than 30 days after your project end date.
- The cost of preparing an application is the responsibility of the applicant.
- All projects must be located within NSW and must be delivered in full within 12 months.
- Your organisation must be based in NSW and maintain current and adequate Public Liability insurance (minimum $10 million) per claim or be willing to purchase it.
- Submissions close on **30 June 2026 at 4pm.**
- **Applications that are incomplete or received after the closing date will not be considered. Once an application is submitted, your form cannot be varied.**

Support available:

If you need support or have any questions about the grant program, please contact the *Healing at Home on Country Aboriginal Elders & Mentors grant program lead* via email: **accu@correctiveservices.nsw.gov.au**

Please quote your Application Number (below) when contacting the Department of Communities and Justice or Corrective Services NSW.

Application Number

This field is read only.

Program Details

Healing at Home on Country, Community-based Aboriginal Elders & Mentors Program is one of four activities for Corrective Services to receive funding under the NSW Close the Gap Aboriginal Throughcare Strategy. The Aboriginal Throughcare Strategy aims to increase the availability of culturally appropriate supports for Aboriginal children and adults while in and after leaving prison and expand the involvement of Aboriginal Community Controlled Organisations (ACCOs). This will enable Aboriginal adults to exit custody and safely reintegrate into community.

This grant provides a platform to be innovative, think outside the square and tailor a program to meet the needs of your communities.

Grant Program Name

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

Disclaimer

The Applicant organisation acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any project, and DCJ expressly reserves its right to accept or reject this application at its discretion;
- they must assume the cost of preparing and submitting this application and DCJ does not accept any liability for costs incurred, whether the application is accepted or not; and
- they have read the Grant Program Guidelines and has fully informed themselves of the relevant program requirements.

Use of Information

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

- if this application is successful, the relevant details of the proposal will be made public, that include 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;
- DCJ will take reasonable steps to ensure that any information pertaining this application which is clearly marked 'Commercial-in-confidence' or 'Confidential' is treated as such, however, such documents will remain subject to the *Government Information (Public Access) Act* 2009 (GIPA Act); and
- in some circumstances DCJ 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

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

- DCJ is required to comply with the *Privacy and Personal Information Protection Act* 1998 (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://dcj.nsw.gov.au/statements/privacy/privacy-policy.html**);

- the information they provide to DCJ 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;
- they have 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 DCJ 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 Criteria

* indicates a required field

Applicant's eligiblity

To be eligible to apply for the grant program you **must be***:*

- a not-for-profit Aboriginal Community Controlled Organisation (**ACCO**) based in NSW.For the purpose of this grant the Definitions of an ACCO delivers services that build the strength and empowerment of Aboriginal and Torres Strait Islander communities and people, and is:- incorporated under relevant legislation and not-for-profit.- controlled and operated by Aboriginal and/or Torres Strait Islander people;- connected to the community or communities in which they deliver the services; and- governed by a majority Aboriginal and/or Torres Strait Islander governing body.

A not-for-profit Aboriginal Community Controlled Organisation (ACCO) includes:

- Indigenous Corporations (must be registered with the Office of the Registrar of Indigenous Corporations (ORIC);
- the NSW Aboriginal Land Council (NSWALC);
- Aboriginal Health & Medical Research Council of NSW (AH&MRC)
- an Aboriginal specific organisation or sole provider (at least 51% owned and run)
- Aboriginal sole trader

Is your organisation an Aboriginal and Torres Strait Islander Community-Controlled Organisation (ACCO), per the definition above or an Aboriginal specific organisation or sole provider (51% owned and run)? *

○ Yes ○ No

Is your organisation based in NSW, and will the project be carried out in NSW? *

○ Yes ○ No

ORIC Registration

What is your Office of the Registrar of Indigenous Corporations ICN Number:

Must be a number.
https://www.oric.gov.au/

Evidence of Legal Structure

Evidence that the Applicant Aboriginal Sole Trader Registration if not ORIC registered.

And your organisation's• Constitution Articles or Memorandum to demonstrate the organisation is 51% controlled, operated and governed by Aboriginal and Torres Strait Islander people

Please attach evidence of the Applicant organisation legal structure selected above: *
Attach a file:

Please note: Incorporated organisations and associations should upload a copy of their certificate of incorporation from NSW Fair Trading. Not-for-profit companies should upload a copy of their ACNC certificate or certification of DGR status. Indigenous Corporations should attached a copy of their registration certificate from the Office of the Registrar of Indigenous Corporations (ORIC)

Please upload your Organisation's Constitution - evidence it is 51% controlled, operated and governed by Aboriginal and Torres Strait Islander people. *
Attach a file:

Insurance

Grant recipients must maintain current and adequate insurance appropriate to the activities/ services funded under this grant to cover any liability of the grant recipient that might arise in connection with the performance of its obligations under a Grant Funding Agreement. This must include a minimum of $10 million Public Liability Insurance or a willingness to purchase it.

Does the applicant organisation have at least $10 million in public liability insurance, or is willing to obtain $10 million in public liability insurance? *
- ○ Yes
- ○ No, but willing to obtain

Applicants are required to hold at least $10 million public liability insurance in order to enter into a grant funding agreement with the NSW Government. If you do not have insurance in place now, you will be required to purchase insurance and provide a copy of the certificate of currency.

Evidence of Insurance

Please provide a certificate of currency that fulfils the following criteria:

- Currently valid
- Issued to, or confirms coverage for the applicant organisation
- Covers *"Public Liability"* for at least **$10,000,000**

Please upload a current and valid copy of your Public Liability Insurance *
Attach a file:

HINT: PLI must be a minimum value of $10,000,000

Eligibility Confirmation

Please declare this application meets the eligibility criteria as listed above, as well as the additional mandatory criteria below:

- I have read and understand the **Healing at Home on Country Aboriginal Elders & Mentors** Grant Program Guidelines and the Healing at Home Grant Guide for Support
- Proposed project aligns with the objectives of the program that are included in the **Grant Program Guidelines.**
- Proposed project will be located in NSW.
- Project will be completed by 30 September 2027.
- If successful, the applicant organisation can maintain adequate and current insurance cover as appropriate. This may include, but not limited to Workers Compensation Insurance, Professional Indemnity Insurance, Personal Accident Insurance, and a **minimum of $10 million Public Liability Insurance.**
- Applicant organisation does not have a Redress Obligation under the *NSW National Redress Scheme.*
- Applicant organisation does not have any outstanding acquittals with DCJ.

I confirm that I have read and understand the Grant Program Guidelines and the information above and I can confirm this grant submission meets the requirements for the HHC AEM Grant Program: *

☐ Yes

Organisation Details

* indicates a required field

Applicant

DCJ on behalf of Corrective Services NSW will only provide a grant to a single organisation.

Which of the following applies? *

○ I am applying on behalf of my organisation

Organisation Details

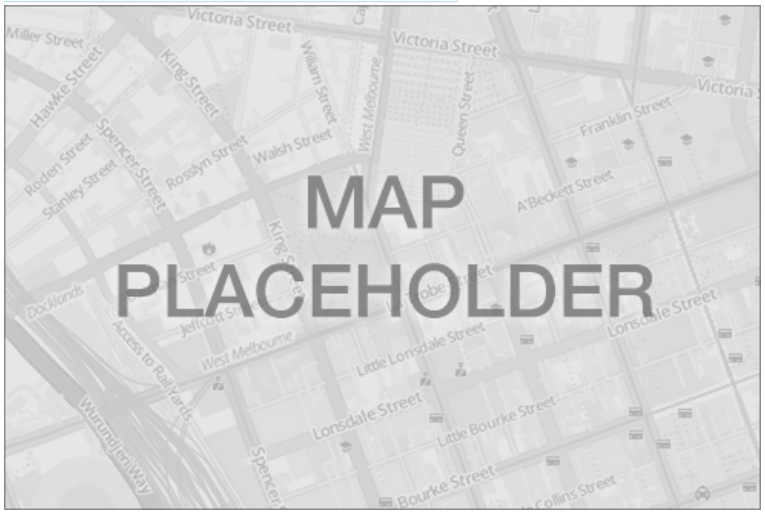
Organisation Name *

Organisation Name

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.

Primary Address

Address



Postal Address
Address

Primary Phone Number *

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

Other 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.

Website

Must be a URL.

Does the applicant organisation have an Australian Business Number (ABN)? *

○ Yes ○ No

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.

Primary Applicant Contact Details

Applicant Project Contact *

Title | First Name | Last Name

Applicant Project Contact Position *

Applicant Project Contact Primary Phone Number *

Must be an Australian phone number.

Applicant Project Contact Primary Email *

Must be an email address.
This is the address we will use to correspond with you about this grant.

Applicant 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 organisation
- Clearly show the BSB, account number and name of the account holder
- Be a statement on financial institution letterhead
- Not be an online transaction list

Finance contact

Should your application be successful, this person may be contacted by our payments team to confirm payment of your grant.

Finance Contact *
Title | First Name | Last Name

Primary Email *
Must be an email address.

Phone Number *
Must be an Australian phone number.

Authorised Signatories

- The Authorised Organisation Contact will receive formal correspondence from the Department of Communities and Justice and will be the organisation's **authorised delegated contact and sign the Grant Funding Agreement .**
- Grant Funding Agreements can only be signed by authorised officers of your organisation. This may be a member of the executive/committee as deemed under the Articles of Association or Constitution for a not-for-profit organisation, or the General Manager or delegated officer if you are a council.
- DCJ will add your contact details to the Payment and Contracting system. **Please note that each email address must be unique and cannot be associated with more than one individual.**
- It is your responsibility to update the Department of Communities and Justice of any contact detail changes during the delivery of the project.

Note: More information on DCJ authorised signatories is available on our website. The 2 authorised signatories have delegated authority to sign on behalf of the organisation and should be the General Manager, CEO or Executive Officer, President, Organisation Board or Committee of Management Chair.

Applicant First Authorised Signatory *

Title First Name Last Name

This is the person we will correspond with about this grant.

First Authorised Signatory Position *

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

First Authorised Signatory Phone Number *

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

First Authorised Signatory Email *

Must be an email address.
This is the address we will correspond with you about this grant.

Second Authorised Signatory

Applicant Second Authorised Signatory *
Title First Name Last Name

Second Authorised Signatory Position *

Second Authorised Signatory Phone Number *

Must be an Australian phone number.

Second Authorised Signatory Personal Email *

Must be an email address.

Project Details

* indicates a required field

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 200 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.

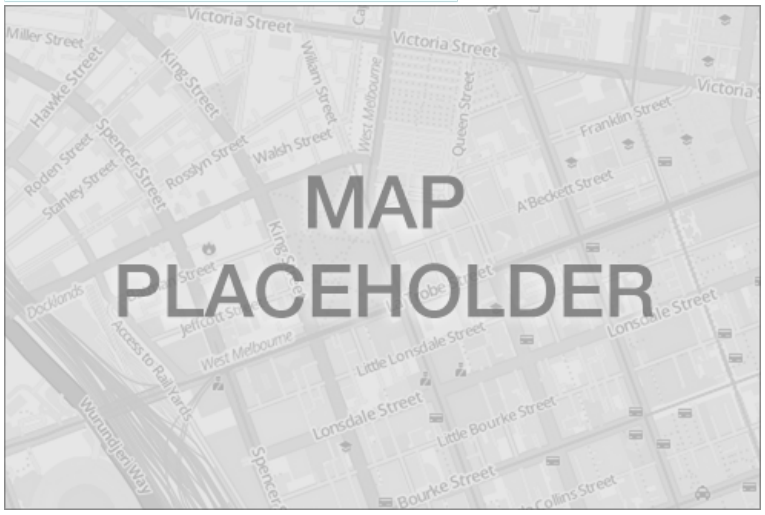
Anticipated start date *

Must be a date and no earlier than 1/9/2026.

Anticipated end date *

Must be a date and no later than 30/9/2027.

Primary location of your initiative
Address



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.

Activity Table

Click 'Add More' at the bottom of the table to add additional rows if required.

Activity	Anticipated Start date	Anticipated End date
One per row. Add more rows if you want to list additional activities.	Must be a date and no earlier than 1/6/2026.	Must be a date and no later than 30/9/2027.

Assessment Criteria

* indicates a required field

Responding to the Assessment Criteria

All eligible applications must meet the following assessment criteria to be considered for funding:

1. **Relevance:** The proposed activity clearly aligns with the objectives and meets the specific outcomes of the grant program.
2. **Impact:** The project will produce clear, positive results. You need to show proof of past and current success, or the potential to achieve these results.
3. **Implementation:** The applicant has the necessary experience and resources to complete the project on time and within the budget, ensuring good participation and value for money.

You can answer these questions either in writing or file upload, please choose: *

○ We would like to answer these questions in this form, in writing
○ We would like to record audio of our answer, and upload the file here

Criteria 1 - Relevance

C1 How does your proposed project meet the purpose of the grant program? *

Word count:
Must be no more than 200 words.

C1a - Which Healing at Home on Country program objectives/targeted outcomes does your project address, and how? Refer to Section 2.3 of the Guidelines *

Word count:
Must be no more than 200 words.
Section 2.3 of the grant Guidelines

Criteria 2 - Impact

C2 What positive changes do you expect this project will achieve for Aboriginal people leaving custody and/or on parole? *

Word count:

Must be no more than 200 words.
e.g. changes to their wellbeing, stronger cultural connection, smoother reintegration, reduced re-offending

C2a - Describe any relevant past experience or examples that demonstrate your organisation's ability to deliver similar outcomes (if applicable). Include how the benefits of the project may continue beyond the funding period. *

Word count:
Must be no more than 200 words.
List or describe any relevant past experience or examples.

Criteria 3 - Implementation

C3 What experience, skills and resources does your organisation (and any partners) have to deliver this project effectively? *

Word count:
Must be no more than 200 words.
Include the role of Aboriginal Elders, mentors or cultural leads where relevant.

C3a - How will you ensure strong participation from Aboriginal people leaving custody and/or on parole? *

Word count:
Must be no more than 200 words.
e.g. engagement methods, culturally safe approaches, accessibility considerations

Record Audio Answer and Upload File

Audio recording software is freely available on most computers and phones. If you provide an audio response, the following information may be useful.

HOW TO CREATE AN AUDIO RECORDING ON YOUR PHONE/COMPUTER: Click on the links below for further instruction on how to make an audio recording for the following devices. **Computer:**

- Mac
- Microsoft

Phone:

- iPhone
- Android-Google Pixel-Samsung

SAVING YOUR AUDIO RECORDING: Your recordings will automatically be stored in the Sound Recorder/Voice Memos app. To upload your recording in SmartyGrants, you will first need to save your it locally as an audio file – that is outside of the Sound Recorder/Voice

Memos App - in the device (phone or laptop) that you want to complete the application with.

There are a number of ways to do this. The following information provides guidance on only some of the ways that you can save a recording locally as an audio file.**a) You can save a recording as an audio file directly from the app by selecting the ellipses icon "…" and then selecting save.**

b) On a laptop, you can drag and drop the audio recording to your desktop

c) Share Recording to your email address and then save attachment to your device. *This option allows you to share recordings from your phone to your laptop.**Sharing a recording allows you to send the recording to your email, where you can then select the recording in the email attachment and select Save*

- Share a recording on Mac
- Sound Recorder app for Windows: FAQ
- Share a recording in Voice Memos on iPhone
- See your recordings on all your Apple devices
- Share a recording on an Android Phone-Share recording on Google Pixel-Share recording on Samsung

Please ensure that you save and upload the audio file:

- 1 audio file is required for each question.
- Please upload your response to each question separately.
- Each recorded response should be between 1 and 1.5 minutes long.
- Files must not exceed 40MB.
- Please ensure the files are clearly labelled accurately to reflect the assessment criteria response.

Criteria 1 - Relevance

C1 (file upload) How does your proposed project meet the purpose of the grant program? *
Attach a file:

A maximum of 1 file may be attached.

C1a (file upload) Which Healing at Home on Country program objectives/targeted outcomes does your project address, and how?, refer to Section 2.3 of the Guidelines *
Attach a file:

A maximum of 1 file may be attached.

Criteria 2 - Impact

C2 (file upload) Which Healing at Home on Country program objectives/targeted outcomes does your project address, and how?, refer to Section 2.3 of the Guidelines *
Attach a file:

A maximum of 1 file may be attached.
e.g. wellbeing, cultural connection, reintegration, reduced re-offending

C2a (file upload) Describe any relevant past experience or examples that demonstrate your organisation's ability to deliver similar outcomes (if applicable). Include how the benefits of the project may continue beyond the funding period. *
Attach a file:

A maximum of 1 file may be attached.

Criteria 3 - Implementation

C3 (file upload) What experience, skills and resources does your organisation (and any partners) have to deliver this project effectively? *
Attach a file:

A maximum of 1 file may be attached.
Include the role of Aboriginal Elders, mentors or cultural leads where relevant.

C3a (file upload) How will you ensure strong participation from Aboriginal people leaving custody and/or on parole? *
Attach a file:

A maximum of 1 file may be attached.
e.g. engagement methods, culturally safe approaches, accessibility considerations

Project Budget

* indicates a required field

Funding amount selection

One-off funding for 12 months is available to the successful recipients. Applicants can apply for a grant amount ranging from a minimum $5,000 up to $10,000.

- DCJ may also offer successful applicants a package lower than the amount requested.
- Grant funding must be spent by 30 September 2027.
- Funding amount excludes GST.

Total Amount Requested *

$

Must be a whole dollar amount (no cents) and between 5000 and 10000.
What is the total financial support you are requesting under this grant?

Grant Funding Exclusions

Organisations must use the grant funds, including any interest earned, for the purposes of the grant.

Items or activities that funding **cannot** be used for including:

- Any activity of a commercial nature that is for profit
- Existing debt or budget deficits
- Capital works, including building work
- Permanent salaries/wages (costs for temporary tutors/instructors for your program or activity can be included)
- Permanent equipment purchases, for example tables and computers
- Business as usual costs or general operating expenses
- Programs or activities that encourage gambling such as bingo, or the consumption of alcohol
- Programs and activities coordinated by NSW Government Departments and Statutory Authorities
- The same project twice. For example, two different organisations cannot apply for funds for the same program or activity

Please confirm that you will not spend grant funding on the above excluded items. *

○ Yes

Applicant's Budget (Grant Funding):

- Please include all expenditure items that you are seeking to fund under the grant.
- Note, these items must be eligible under the grant according to the guidelines.

Description	**Amount Budgeted (ex. GST)**
List the items you will pay for using grant funding	Must be a dollar amount.

Total Grant Program funded expenses *

This number/amount is calculated.
This figure must match the Total Amount Requested (above).

Proposed Expenditure Total

- **To have an equal budget the number below must equal "0"**
- The total amount requested MUST match your total amount expenditure.

Total Amount Requested minus Total Expenditure *

This number/amount is calculated.
To have an equal budget the number must equal "0"

Declaration and Authorisation

* indicates a required field

Declaration

Below you are asked for the details of the person who can provide ‘Authorisation’ of your application.

As an authorised signatory you agree to the following statements:

- I certify that the information in this application is true and correct.
- I declare that I have the appropriate authority to submit this application on behalf of my organisation.
- I acknowledge that this is one-off grant funding.
- I agree that if successful, details about the outcomes may be used by Corrective Services NSW for informative and evaluation purposes.

***Please tick the 'check box' below if you agree to these statements**

Registered Name of Organisation *

Authorisation

I agree * ☐ Yes

Name of authorised person * Title First Name Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

How did you find the online application process?

○ Very easy ○ Easy ○ Neutral ○ Difficult ○ Very difficult

How many minutes in total did it take you to complete this application?

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.

Submission

- **Once you have submitted your application, no further editing or uploading of support materials is possible.**

You will not be able to submit your application until all the compulsory questions are completed. When you submit your application, you will receive an automated confirmation email with a copy of your submitted application attached. This will be sent to the email you supplied under Organisation's Details.

If you do not receive a confirmation of submission email then your application has **NOT** been submitted. Please email Grant Design and Support @ grantdesignandsupport@dcj.nsw.gov.au, please quote your Application ID in all correspondence.