

Disability Advocacy Futures Program: 2026 Grant Stream 2 Thriving Kids

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Program Details

In NSW, approximately 1.5 million people live with disability. Of those, approximately 13% are eligible for services and supports under the National Disability Insurance Scheme (NDIS).

The Disability Advocacy Futures Program (DAFP) commenced on 1 January 2022 to support all people with disability in NSW to access NSW Government funded and delivered services.

The **DAFP 2026 Grant Stream 2 - Thriving Kids** grant round will focus on improving outcomes for children aged 0 to 8 years with developmental delay and/or autism, and their families, carers and kin. The grant round will support initiatives that promote early intervention, prevention and community-based supports, helping children to thrive in their families, communities and everyday environments.

The grant round aims to create stronger pathways for children and families to access the supports they need, when they need them, and to build more connected, responsive and sustainable community support systems across NSW.

As a result of the new Thriving Kids program a new cohort of people may need assistance to access and navigate NSW government and mainstream services in a safe and supported way.

The DAFP grants include targeted, one-off funding for organisations to deliver projects that:

- support parents, families and kin of children with disability in NSW to navigate services and access appropriate supports
- strengthen the capacity of not-for-profit organisations to drive long-term social change for people and / or children with disability
- enable policy advocacy organisations, led by or operating on behalf of people with disability, to collaborate with government on the development of effective disability policy.

Up to **\$1,000,000** (excluding GST) in total funding is available for **projects** across a duration of **12 months**.

Applicants can apply for funding from **\$30,000** to **\$100,000** for projects that meet the assessment criteria.

Grant Program Name

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

Instructions for Applicants

Applicants are encouraged to read all the details in the [Grant Program Guidelines](#) before applying.

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

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Please Note:

- This grant is one-off funding with a fixed 12 months term ending **February 2028**.
- Your application must be accurate and complete upon submission.
- All projects must be located within NSW and must be delivered in full within 12 months.
- Submissions close on **24 November at 4pm**.
- **Late applications will not be accepted.**

Support available:

If you have any questions, please contact the Disability Data, Engagement and Advocacy team by email at DAFP@dcj.nsw.gov.au.

If you experience any difficulties with preparing or submitting your application please email Grant Design and Support at GrantDesignandSupport@dcj.nsw.gov.au.

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

Application Number

This field is read only.

Disclaimer

The Applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any project, and the Department of Communities and Justice (DCJ) 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 DCJ does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- it has read the [Grant Program Guidelines](#) 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 application is successful, the relevant details of the proposal 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;
- DCJ will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-in-confidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the *Government Information (Public Access) Act 2009* (GIPA Act); and

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- 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 Confirmation

This section of the application form is designed to help you, and us, understand if the organisation meets the eligibility criteria for DAFP 2026 Grant Stream 2 - Thriving Kids. It's important that all of the points listed below are confirmed before you complete your application to ensure that you do not spend time applying for an unsuitable grant.

Please declare this application meets the Program eligibility criteria:

- I have read and understand the [Grant Program Guidelines](#)
- Proposed project aligns with the objectives of the program that are included in the Grant Program Guidelines
- Proposed project will be located in NSW
- Will provide a Certificate of Currency for a minimum of \$10 million Public Liability Insurance
- Our organisation does not have any overdue acquittals with DCJ
- Our organisation has addressed the NSW Redress Scheme Sanctions
- Projects can commence within **March 2027** and be completed within **February 2028**.

I confirm that the applicant and project is eligible according to the criteria outlined in the Program Guidelines *

☐ Yes

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Organisation Details

* indicates a required field

Organisation Details

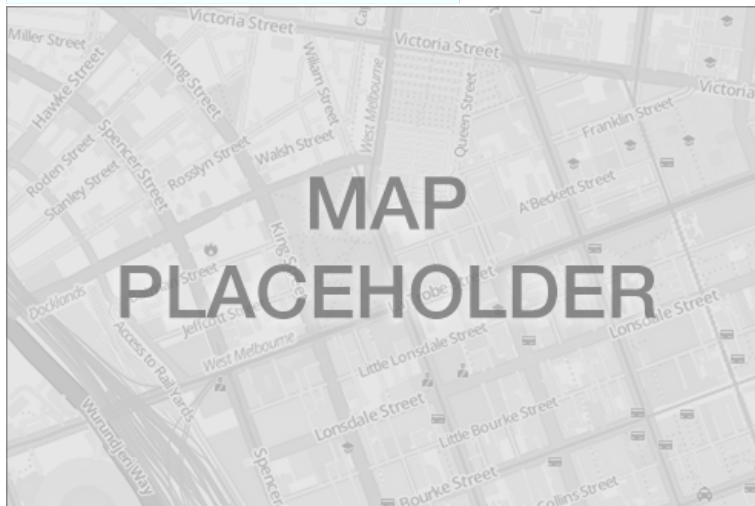
Organisation Name *

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

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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.

Project Administrator Contact Details

All correspondence generated via SmartyGrants will be sent directly to this person within your organisation. This may include, but not limited advice on the outcome of your application and reporting as required.

Project Contact *

First Name

Last Name

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

Project Contact Position

*

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

Project Contact Phone Number *

Mobile phone number preferred

Project Contact Other Phone Number

Area code for landlines required.

Project Contact Email *

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

Aboriginal and Torres Strait Islander Community-Controlled Organisations

The Department of Communities and Justice is committed to funding Aboriginal and Torres Strait Islander Community-Controlled Organisations (ACCO).

For the purpose of this grant 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.

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Is your organisation an Aboriginal and Torres Strait Islander Community-Controlled Organisation (ACCO), per the definition above? *

- ☐ Yes ☐ No

PLEASE NOTE: If you are a NSW Local Aboriginal Land Council or you are registered with the Office of the Registrar of Indigenous Corporations (ORIC) you are automatically considered an ACCO. If you are not a NSW Local Aboriginal Land Council or you are not registered with ORIC, you may be required to provide evidence under each of the four categories listed above during the assessment process.

ORIC Registration

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

Must be a number.

<https://www.oric.gov.au/>

Organisations Legal Status

Legal status of your organisation *

- ☐ Incorporated organisations that are registered and approved as not-for-profit bodies by NSW Fair Trading
- ☐ NSW local council operating under the Local Government Act 1993
- ☐ Not-for profit companies limited by guarantee, registered in NSW (must have ACNC registration and/or DGR status)
- ☐ Indigenous Corporations (must be registered with the Office of the Registrar of Indigenous Corporations)
- ☐ NSW Local Aboriginal Land Councils
- ☐ NSW non-government organisations established under their own Act of Parliament.

If your organisation type is not on this list, please refer to the Guidelines as you may NOT be eligible.

Please provide your incorporation or association number to confirm your legal status:

HINT: You can check your incorporation or association number by searching for your organisation at the following link <https://applications.fairtrading.nsw.gov.au/assocregister/default.aspx>.

What is the name of the Act of Parliament that established your non-government organisation? *

Hint: Please note that to be a "NSW non-government organisation established under an Act of Parliament" your organisation needs to have been established by name under an Act of Parliament (this is relatively rare, and applies only to NSW universities and a small number of large charities which have had Acts of Parliament enacted for this purpose – for example, the Macquarie University Act 1989).

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

- ☐ Yes ☐ No

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PLEASE NOTE: All applicants are required to meet certain eligibility criteria including having an Australian Business Number (ABN). You are therefore not eligible for this grant.

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.

Subcontracting

Is the applicant planning on subcontracting to another organisation for the purpose of this grant? *

☐ Yes ☐ No

Applications under a subcontracting arrangement should be submitted by the lead organisation. The arrangement should be formalised at the time of application.

Nature of subcontracting arrangement

Confirm that you are aware of the Department's procedures on subcontracting, and that you have policies and procedures in place, and adhere to them, on the selection and evaluation of subcontractors. *

☐ Yes

<https://dcj.nsw.gov.au/service-providers/working-with-us/contract-management-policies-resources/subcontracting.html>

Subcontracting organisation name *

Organisation Name

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.

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Subcontracting ABN *

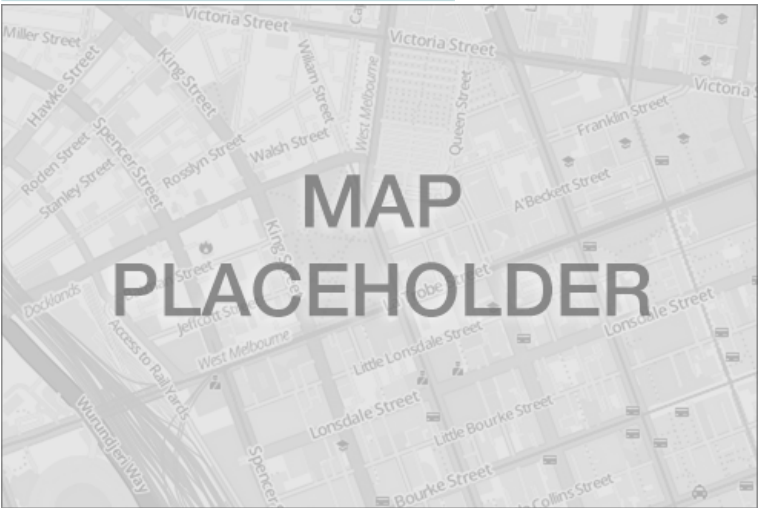
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

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.

Subcontracting Primary Address *

Address



Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Primary Contact Person at Subcontracting Organisation *

Title	First Name	Last Name

Position *

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Phone Number *

Must be an Australian phone number.

Primary Email *

Must be an email address.

Please attach a letter from the Subcontracting organisation confirming that the Subcontracting arrangement is valid and current. *

Attach a file:

A maximum of 1 file may be attached.

Please identify the name of the partner / subcontracted organisation and the roles and responsibilities in the delivery of your proposal. The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

Bank Details

It is your responsibility to provide the correct bank account details for funds transfer. Funds transferred to an incorrect bank account may not be recoverable.

Applicant Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Please upload a recent bank statement of the account you would use to receive the grant funding if you are successful *

Attach a file:

A maximum of 1 file may be attached.

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 and name of the account holder
- Be a statement on financial institution letterhead
- Not be an online transaction list

Eligibility Details

* indicates a required field

Applicant Organisation ACN or AIN *

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Enter Organisation ACN (Australian Company Number) or AIN (Association Incorporation Number) if ABN not there.

DCJ Funded Provider

Are you currently, or have been contracted to delivery services for DCJ in the past 5 years? *

- ☐ Yes
☐ No

NOTE: This is for funded services under a DCJ contract and does NOT include previous grant funding.

Service Provider ID

Please provide your Service Provider ID? *

Please open your Payments and Contract (PACS) portal to locate the number <https://pacs-provider-portal.dcj.nsw.gov.au/>.

Does your organisation have at least \$10 million in public liability insurance? *

- ☐ Yes
☐ No

Applicants are required to hold at least \$10 million public liability insurance in order to enter into a grant funding agreement with NSW Government.

Please confirm that your organisation has not been publicly identified as declining to join the NSW National Redress Scheme OR failing to join the scheme at the expiry of six months after being notified to join the Scheme. *

- ☐ Yes, I confirm
☐ No, I cannot confirm (You may be deemed ineligible for this grant)

PLEASE NOTE: For more information on the NSW Government Redress Scheme Sanctions Policy, visit <https://arp.nsw.gov.au/c2021-13-nsw-government-redress-scheme-sanctions-policy/>

Does your organisation have any overdue acquittals due to the Department of Communities and Justice ? *

- ☐ Yes - you may be deemed ineligible for this grant program
☐ No

PLEASE NOTE: If your organisation has any outstanding acquittals due to the Department of Communities and Justice you are not eligible to apply to this grant program. Please complete any outstanding acquittals prior to submitting your application.

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

Grant Project Details

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* 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 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 *

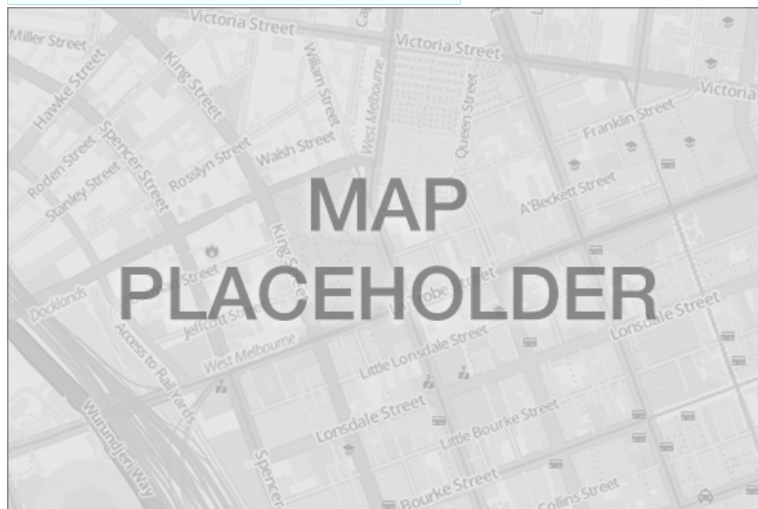
Must be a date and between 1/3/2027 and 29/2/2028.

Anticipated end date *

Must be a date and between 1/3/2027 and 29/2/2028.

Primary location of your initiative *

Address



Must be an address in NSW

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Activities

Please detail the activities expected to be completed as a result of the funding. You can stipulate one location for each activity.

Activity	Expected start date	Expected end date
One per row. Add more rows if you want to list additional activities. Must be no more than 25 words.	Must be a date and between 1/3/2027 and 29/2/2028.	Must be a date and between 1/3/2027 and 29/2/2028.

Prioritisation

The **DAFP 2026 Grant Stream 2 - Thriving Kids** funding focuses on all people with disability in NSW who need support to access NSW Government funded or provided services, whether they are NDIS participants. Where relevant, it may also target and prioritise specific communities and disability types as noted in **section 1.7** of the [Grant Program Guidelines](#).

Which of the following groups will participate in your project? *

- ☐ children with disability and their carers/families
- ☐ Aboriginal people with disability
- ☐ people with disability from culturally and linguistically diverse (CALD) backgrounds
- ☐ people with disability identifying as lesbian, gay, bisexual, transgender, intersex, queer or asexual (LGBTIQA+)
- ☐ people with disability in isolated locations and in rural, regional and remote areas

NB: Applications may also be prioritised geographically to support an equitable spread of funds and projects across NSW.

Outcomes

The purpose of the **DAFP 2026 Grant Stream 2 - Thriving Kids** is to fund initiatives to support significant pieces of work that further the advocacy, and information priorities of children 0-8 years with developmental delay and / or autism, with low to moderate support needs, and for their families, carers and kin in NSW. A range of focus areas has been identified and listed in **section 1.7** of the [Grant Program Guidelines](#).

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.

Outcome

How does your intended outcome link to the DAFP 2026 Grant Stream 2 - Thriving Kids outcomes / focus areas?

How will the proposed project contribute to the development of the NSW disability advocacy	Please explain how your intended outcome helps	Add notes if you need to provide more context.
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sector and assist people with disability to actively engage in their communities? Please be brief. One per row. Must be no more than 25 words.	contribute to the DAFP Program Outcomes / focus areas. Must be no more than 50 words.	

Assessment Criteria

* indicates a required field

The **DAFP 2026 Grant Stream 2 - Thriving Kids** Grant Program has been created to meet 4 key objectives and outcomes:

- increase the availability of advocacy supports to assist children aged 0-8 years with developmental delay and/or autism and their families, carers and kin, to access information, engage with services and supports, and participate in their communities in an informed and empowered way.
- further develop the NSW disability advocacy and service sector through quality improvement, collaboration and innovation, and initiatives that build the capacity of individuals, families, carers and kin to self-advocate.
- build stronger networks, partnerships and learning opportunities across the NSW disability advocacy sector, including initiatives that strengthen linkages between advocacy, early childhood, health, education and community services.
- support people and / or children with disability and their families, carers and kin to respond and adapt to key policy reforms at a state and national level by developing their self-advocacy capacity, access to information and broad advocacy supports.

Assessment Criteria 1 - Demonstrated understanding of and commitment to the provision of advocacy and information supports for children 0-8 years with developmental delay and / or autism, with low to moderate support needs, their families, carers and kin in NSW, and organisational experience that is relevant to the proposed project.

Your response to this criterion must:

- demonstrate the history, commitment and experience of your organisation in delivering similar projects to that proposed or your capacity to deliver a new project:
 - identify the resources, networks and community links that will support the successful implementation of the project
 - identify the expected outcomes of the project and long-term sustainability and impacts of the project.

C1 Please describe your organisation's understanding of and commitment to providing advocacy and information supports for children 0-8 years with developmental delay and / or autism, with low to moderate support needs, their families, carers and kin in NSW, and outline the experience your organisation brings to the proposed project *

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Word count:

Must be no more than 250 words.

Assessment Criteria 2 - Demonstrated ability to meet the grant objectives and outcomes.

Your response to this criterion must:

- detail how your delivery of this Grant Program will:
 - ensure quality, positive and sustainable outcomes for children 0-8 with developmental delay and / or autism, with low to moderate support needs and their supporters to actively engage in advocacy in their communities in a more informed and empowered way or,
 - drive quality improvement, collaboration and innovation among advocacy organisations, and to build stronger networks and learning opportunities.
 - explain how the Grant Program outcomes will be measured, specifically how quality outcomes will be met and monitored.

C2 - Please describe how your project will address the Program objectives and outcomes *

Word count:

Must be no more than 250 words.

Please use headings in your response to identify different objectives and outcomes.

Assessment Criteria 3 - Demonstrated value for money and capacity to deliver projects/activities for the target group(s).

Your response to this criterion must:

- provide a detailed description of your business framework, model of service delivery and processes involved in providing the service
- explain and include examples of the activities and programs established to address the need of your target group
- outline your target group
- provide a proposed timeline of delivery of your project
- explain why your model of delivery requires the level of funding requested

C3 - Please demonstrate how your projects/activities will achieve value for money and what capacity your organisation has to deliver the projects/activities for the target group(s)? *

Word count:

Must be no more than 250 words.

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Assessment Criteria 4 - Demonstrated experience working with the target group(s) and ability to collaborate and consult with relevant stakeholders.

Your response to this criterion must:

- discuss your experience in delivering services to the target cohort or capacity and experience to carry out the work proposed.
- detail the existing stakeholders and any partnership relationships which will assist to deliver the proposed initiative
- detail community links and engagement with relevant stakeholders (including government and non-government organisations).

C4 - Please describe what capacity and expertise your organisation has in delivering services to the target group(s) and detail your ability to collaborate and consult with relevant stakeholders? *

Word count:

Must be no more than 250 words.

Budget

* indicates a required field

Total Amount Requested

*

Must be a dollar amount and between 30000 and 100000.

What is the total financial support you are requesting under this grant?

Grant funds exclusions

The following items or activities will not be considered eligible for funding:

- 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 items or activities. *

☐ Yes

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Expenditure

Please include all expenditure items (excluding GST) that you are seeking to fund under the grant.

Please note, these items must be eligible under the grant as according to the guidelines.

Description	Type	Amount Budgeted (ex. GST)
		Must be a dollar amount.

Total budgeted expenditure (ex. GST)

This number/amount is calculated.

Please ensure this matches the Total Amount Requested.

Would you accept delivering the proposed project with a lower funding amount than what you have requested above? *

- ☐ Yes
☐ No

Authorised Signatories

* indicates a required field

Organisation Authorised Signatories

- 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.
- More information re: signatories <https://dcj.nsw.gov.au/service-providers/working-with-us/how-we-work-with-you/authorised-signatories.html> outlines general requirements to ensure contracts with DCJ are signed by authorised signatories.
- Authorised signatories will receive and sign the Grant Funding Agreement.
- **Please note that each email address must be unique and cannot be associated with more than one individual.**
- If successful in your application, and your authorised signatories change between submission of this application and the notification of grant outcome, it is essential that you notify DCJ of the changes grantdesignandsupport@dcj.nsw.gov.au.

First Authorised Signatory *

First Name

Last Name

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First Authorised Signatory Position *

First Authorised Signatory Phone Number *

First Authorised Signatory Primary Email *

Must be a UNIQUE email address. Please note, Group/Generic email addresses are not permitted.

Second Authorised Signatory *

First Name

Last Name

Second Authorised Signatory Position *

Second Authorised Signatory Phone Number *

Second Authorised Signatory Primary Email *

Must be a UNIQUE email address. Please note, Group/Generic email addresses are not permitted.

Declaration and Authorisation

* indicates a required field

Declaration

Applicant's Declaration

I declare that all information provided as part of this application including the attachments is true and correct.

I am authorised to submit this application on behalf of the organisation making this application.

I acknowledge and agree with the Disclaimer, Use of Information and Privacy Notice clauses, as outlined on page one of this application form. Furthermore, I confirm this application meets the Program Eligibility Criteria.

I understand that information collected through this grant application may be disclosed to other government agencies and their staff, reviewers and assessors. And may be used for the promotion of the Program as well as other Government initiatives.

I understand that any false declaration may render this application ineligible or invalid.

Registered Name of Organisation *

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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.

Artificial Intelligence

Did you use AI in the development of this Grant application? *

☐ Yes

☐ No

Your response to this question DOES NOT impact the assessment and awarding process for this Grant.

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 long did it take you to complete this application?

☐ Less than an hour

☐ 1- 3 hours

☐ 3 - 5 hours

☐ 5 - 8 hours

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

GMS-SGO/Locn/2025 v2.0