

Wimmera Application Form

Form Preview

Welcome to the Victorian Landcare Grants - 2024 Application

How the form works

Saving

The form **does not autosave**. You will need to press the save button regularly to avoid losing your progress. **You can save your responses and come back to them later.**

Tables

You can add more rows to a table by clicking [+] on the right-hand side of the table, and remove rows (empty or not) by clicking [-].

Word limits

Some text boxes have word limits. You will not be able to submit your application until your response is below the word limit for that question. Smartygrants will tell you if you've gone over.

SmartyFile

If your organisation has a valid ABN, you are now eligible to create a SmartyFile.

SmartyFile allows organisations to collaborate with team members, pre-fill information into forms and manage, view, search and sort submissions across multiple funders in one spot.

To learn more go to applicanthelp.smartygrants.com.au/smartyfile

Privacy

The Catchment Management Authority (CMA) is committed to protecting personal information provided by you in accordance with the principles of the Victorian privacy laws. The information collected in this form will be used to assess your application, and if you are successful, it will also be used to administer your grant and promote the program. The information you provide will be made available to the CMA, DEECA via the Victorian Landcare Program Team and the Minister for Environment.

To submit this application form, you will need:

For Project Grants:

- to complete the Group Health Survey
- a budget and detailed costing for your project
- a map of your proposed project area, if your project includes on-ground works
- a copy of your \$10 million public liability insurance (unless Landcare Victoria Inc. insured or if using an auspice, you'll need their details)
- your organisation's ABN/incorporation number (if using an auspice, you'll need their details)
- evidence of support from landholders and/or public land managers (*where applicable*)

For a Support Grant

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- to complete the Group Health Survey
- your organisation's ABN/incorporation number (if using an auspice, you'll need their details)

Section 1 - Grant type and Project details

* indicates a required field

Grant type

You can apply for both grant types using this single application form

You will not be required to fill in all sections of this application if you are only seeking a Support Grant.

Choose one or more of the following *

- ☐ Project Grant (up to \$20,000)
- ☐ Support Grant (up to \$500)

At least 1 choice and no more than 2 choices may be selected.

You may choose to apply for a project grant in addition to a support grant

Support Grant Summary- Provide a brief description of activities to be funded (e.g Insurance costs, publications, meeting expenses) *

Word count:

Must be no more than 300 words.

Insurance costs, publications, meeting expenses

Project outline

Title

Provide a short title for your project (no more than 15 words). The title may be made publicly available. It doesn't form part of the assessment of your project.

Examples

- Waste, Wildlife & Our Waterways
- Gazing through the Grasses
- Reedy River: protection; propagation; revegetation; engagement

Project Title: *

Must be no more than 15 words.

Summary

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Describe your project:

- what is the issue that you want to address?
- what would you like to do?
- what do you hope to achieve?

This description may be made publicly available, and should make sense to someone who doesn't know much about your project.

If you're having trouble with this question, come back to it after you've answered everything else.

Project Summary: *

Word count:

Must be no more than 250 words.

Section 2 - Assessment Questions

*** indicates a required field**

Land and environment outcome (20%)

Please describe how the project contributes to the protection and restoration of land and environment.

Strong responses include:

- Identify the specific issue/s at your site, including relevant site-specific details.
- Explain the activities you will undertake to address the issue/s
- Explain the difference your activities will make to address the issue/s

Q1: How does your project contribute to protection and restoration of land and environment? *

Word count:

Must be no more than 400 words.

Community engagement and capability building (20%)

Please describe the extent to which the project engages and builds on the capability of:

- the group
- and/or volunteers
- and/or Traditional Owners and Aboriginal Victorians
- and/or land managers
- and/or broader community.

Strong responses include:

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- the specific parts of the community that will be involved
- level of involvement
- level of support from landowners and/or land managers
- the capabilities that the community will gain

Q2: How does your project engage and involve the group and/or volunteers? Does your project include partnerships with public land managers or agencies? *

Word count:

Must be no more than 400 words.

Demonstrated need and community benefit (20%)

Please describe your project's alignment with a natural resource management strategy or plan or other statement identifying the need for this project or activity and the community benefit to be delivered by the project. The extent to which the project contributes to local and regional priorities as set out in the Regional Catchment Strategy.

Examples to guide responses include:

- Explanation of how the project relates to the groups' own strategic plan or action plan, and/or links to local, state or federal government strategic plans.
- Explanation of how project outcomes will benefit the community.
- Upload of group strategic plan or action plan with relevant section highlighted.

Q3: Can you draw any linkages between the delivery of your project and larger strategic plans or action plans? *

Word count:

Must be no more than 400 words.

Plan / strategy upload (optional)

Attach a file:

Attachments optional

Project design and group/network capacity (20%)

Describe the resources (skills, experience, expertise) that will be utilised to plan and deliver the project. Include group resources and technical feasibility of the project.

**Priority will be given to eligible projects that are well-planned and achievable.*

Provide an explanation of why you have chosen your proposed project actions.

Examples to guide responses include:

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- What time of year are you planning your revegetation? Why?
- Why are the proposed revegetation species suitable for your project?
- Does your project need to plan out timelines for engagement and consultation?
- Does your group have experience delivering these types of work, or do you require other expertise?

Q4: Describe how you are going to undertake your project including the key stages, activities and the timeframes *

Word count:

Must be no more than 400 words.

Q5: What skills and resources from within the group or other organisations are you going to use to deliver this project? *

Word count:

Must be no more than 400 words.

Plant species list or revegetation plan upload (optional)

Attach a file:

Section 3 - Land manager support: Public and Private

* indicates a required field

Land manager consent

All projects that involve works (e.g. planting, construction) on a physical site will need support from the land owner or manager.

For the application stage, a letter or email showing in-principle support is enough. If your project is funded, you will need to seek formal approval before starting works. Formal approval takes time and may cost money - ensure you have taken this into account when designing your project.

Common public land managers include:

- Parks Victoria,
- Local councils
- DEECA

Private land owners include:

- Individuals & sole traders

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- Businesses

If your proposed project covers land that is owned or managed by more than one organisation or person, you will need to seek support from each land manager.

For example, works near a waterway may need support from both water authority and your local council.

Note: Projects proposing awareness and education actions on public land may also need land manager support and an event plan (e.g. Parks Victoria Event Permits)

Project land status

Does your project occur on *

- ☐ Public land
- ☐ Private land
- ☐ Both
- ☐ Not applicable (non on-ground projects)

You will be required to provide contact details and/or letters of support from land managers in the next section

Public land manager consent

Please attach evidence of support from each land manager you will work with.

Land manager name	Address	REQUIRED- Evidence of project support / approval
e.g. Parks Victoria, DECCA, Council, Water Authority		e.g an email or official letter of support from the land manager

Private landholder support

If your project is going to be over multiple sites, please number each site and match site numbers on the map you will provide (on Page 5).

Name	Site Address	Site ID	OPTIONAL- Evidence of Landholder support
		These site ID's should also be used on your project map (to be provided on the following page)	

Section 4 - Outputs, Map, Budget

* indicates a required field

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Outputs

You will need to estimate the quantity of outputs (activities) to be delivered through the proposed project.

- **Choose** the outputs relevant to your project from the list below
- **Quantify** them for your project (e.g. km's of fencing, hectares of revegetation)

If your project has outputs that don't appear in the list, describe it in the "Other" section and include a unit of measure.

If your application is successful you will be required to report against these targets at the completion of your project.

Select your projects outputs *

- ☐ Fencing
- ☐ Revegetation
- ☐ Rabbit control
- ☐ Weed Control
- ☐ Engagement events
- ☐ Publications
- ☐ Assessments

Fencing **boundary and barbed wire fencing will not be funded*

Fencing should comply with the [Fencing Standards](#) (Part 2, Section 1, Page 5 or for exclusion fencing look under the relevant threat – eg rabbits)

Fencing *

- ☐ Install- Conventional (plain wire)
- ☐ Install- Mesh (standard ringlock and plain wire)
- ☐ Install- Electric

Select which type of fencing you will install

Total length of fencing for your project (km) *

Must be a number.
must be a number

Total area protected within the fenced area (ha) *

Must be a number.

Revegetation

Select the type of revegetation you are proposing *

- ☐ Revegetation- Tubestock
- ☐ Revegetation- Direct seeding
- ☐ Other:

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Populate an output figure for the type of revegetation you are proposing

Revegetation- Tubestock *

Total number of tubestock *

Must be a number.

Record the tubestock to be planted as a number. if

Total area (ha) of tubestock vegetation to be established, maintained or modified

*

Must be a number.

Record your total area in Hectares (Ha)

Populate an output figure for the type of revegetation you are proposing

Revegetation- Direct Seeding

Total area of direct seeding (ha) *

Must be a number.

Record your direct seeding area in Hectares (ha)

Rabbit control

The following rabbit management actions **WILL NOT** be funded; shooting, poisoning, trapping, explosive or fumigation* methods for pest animal control. **This includes engaging a contractor to undertake these activities.**

*Please note, while ripping is still the preferred control method, fumigation for pest rabbit control **may** be funded **if** the following conditions are met:

- Works take place on public land.
- Where ripping is unable to be conducted – e.g. where there are threatened flora and vegetation communities listed under the *Flora and Fauna Guarantee Act 1988 - Threatened List*
- Written approval is provided by the Land Manager.
- Works are carried out by a contractor holding a valid Commercial Operator License (COL) **and** Agricultural Chemical Users Permit (ACUP).
- Preferably includes a combination of both methods, not solely fumigation.

You can describe the control method and associated costs of the proposed rabbit control in the budget section.

Total area of herbivore (rabbit) control (ha) *

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Must be a number.

Record your rabbit control area in Hectares (ha)

Weed control

Select the type and total area of your projects weed control.

You can describe the control method and associated costs of the proposed weed control in the budget section below.

Weed control types *

- ☐ Non-woody
- ☐ Woody
- ☐ Woody and Non-woody

Total hectares of weed control (ha) *

Must be a number.

Record your weed control in Hectares (ha)

Only include area to be treated for weed control.

Engagement Events

These can include but are not limited to education and engagement activities such as property planning courses, field days, education events or demonstrations.

Select which event type(s) you will undertake *

- | | |
|---|--|
| <input type="checkbox"/> Field day | <input type="checkbox"/> Meeting |
| <input type="checkbox"/> Presentation | <input type="checkbox"/> Conference |
| <input type="checkbox"/> Training event | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> Workshop | |

Number of field days *

Must be a number.

Number of presentations *

Must be a number.

Number of training events *

Must be a number.

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Number of workshops *

Must be a number.

Number of meetings *

Must be a number.

Number of conferences *

Must be a number.

Publications

Publication type *

☐ Audio ☐ Visual ☐ Written

At least 1 choice must be selected.

Number of publications *

Must be a number.

Assessments

Assessment type(s) *

☐ Cultural ☐ Ecological ☐ Fauna ☐ Flora ☐ Invasive species ☐ Soil

Total number of assessments *

Must be a number.

Other outputs

Please describe any activities you're seeking funding for which do not fall into the categories listed above

Does your project include work with Threatened Species? *

- ☐ Yes
☐ No

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Map upload

You will need to supply a map for your project.

(LINK NEEDED) Please refer to the **guidelines** for instructions on what is required.

Use the + button on the right hand side to add multiple files.

Project Location- nearest town or locality *

Nearest town or locality

Upload your map file(s) showing your proposed project activities *

Attach a file:

Do not upload shape files.

Budget

This section will account for 20% of your assessment score (Value for money).

Please detail all the items you are seeking funding for, to complete the outputs (activities) you've identified. Be descriptive about what the funds will be used for.

Funding available

You can request up to **\$20,000 (ex GST)** in total. *Use whole dollars only.*

You can apply for **up to 15%** of your total funding request for Project Management. Please see guidelines for further information.

Group operating costs **up to \$500** may be included as a separate budget line in your project (e.g., costs such as insurance, incorporation and operational needs)

Please ensure you refer to the guidelines for 'What will be funded?'

Strong example:

If one of your activities is "purchase materials and construct fence", then your budget items might be:

<i>Item</i>	<i>Description</i>	<i>Site ID</i>
<i>Funds requested</i>		
• Contractors	6km riparian fence construction	ABC001
\$4,980		
• Materials	Wire, steel posts and end assemblies	ABC002
\$11,740		

Weak example:

- Materials Fencing (no site ID)
\$800 (doesn't provide enough information about the costs involved)

Tables

You can add more rows to a table by clicking [+] on the right-hand side of the table, and remove rows by clicking [-].

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Item	Description of Item	Site ID(s) if relevant	Funds requested	Quotes (if applicable)
			\$	
		(as per your map)	Must be a whole dollar amount (no cents) and no more than 20000.	

Total project funds requested

\$

This number/amount is calculated.

Section 5- In-kind support for your project

* indicates a required field

You are required to describe the in-kind contributions secured for your project.

What in-kind contributions have you secured for your project? *

- ☐ Volunteer labour
- ☐ Support from within your organisation
- ☐ Support/involvement from partner organisations (including individuals, other groups and other funding programs)

Volunteer contributions

Please describe how volunteers will contribute to your project. The volunteer time of community group members is costed as an in-kind contribution of \$44.16 per person per hour.

The table will automatically calculate the value, based on the following formula: **Volunteer contribution** = number of **volunteers** X **hours** per day X number of **days** X **\$44.16**

Strong responses will describe the activities you plan to undertake with volunteers. Similar activities may be grouped into one line, or split into several lines. Choose the method that best explains how the volunteers will contribute to your project.

Description	Number of volunteers	Number of volunteer days	Number of volunteer hours worked per day	Volunteer contribution
e.g. cleanups, planting days, information sessions	Must be a number.	Must be a number.	a number	This number/amount is calculated.

Support from within your organisation

Please describe the support that your organisation plans to provide for the project.

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***Volunteer and partner contributions should not be listed here - there is a separate table for this information.**

Strong responses describe the contributions that you plan to make:

- printing of materials on office printer (100 flyers @50c per flyer = \$50)
- plants from our nursery (100 tube stock @\$1.50 each = \$150)
- coordination of volunteers for events (6hrs @\$40/hr = \$180)
- oversight of project (2 hrs per week x 4 weeks @\$40/hr = \$240)

Weak responses may be vague, or list things that are unrelated to your project.

Description of your organisation's contribution to project

Value of contribution (\$)

	\$
	Must be a dollar amount.

Support from partner organisations

Please describe the support that your groups members, project participants and partner organisations plan to provide for the project. **Funding from other sources should be listed here, along with donations and access to equipment.**

Volunteer labour and contributions from your organisation **should not** be listed here.

Strong responses describe the contributions that your partners plan to make:

- loaned or donated equipment
- access to office equipment
- donated materials

Weak responses may be vague, or list things that are unrelated to your project.

Project partner's name

Description of partner's contribution to project

Value of partner's contribution (\$)

Evidence of support, showing partner is willing to provide this support

		\$	
		Must be a dollar amount.	Email, letter of support etc.

Summary of matched funding and in-kind support

Click '**Save Progress**' to show any changes you make which will update the calculations.

Total amount requested

\$

This number/amount is calculated.
What is the total financial support you are requesting in this application?

Total matched funding

\$

This number/amount is calculated.

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**Your funding is matched
1 to:**

A value of 1 or higher indicates a 1:1 matched funding.
Values higher than 1:1 will not necessarily score higher during assessment.

Section 6- Organisation details

** indicates a required field*

Organisation details

Please enter the contact details for your organisation. If you have an auspice, you will be asked to enter their details on the next page.

Organisation name *

Organisation Name

What type of volunteer-based group are you? *

- ☐ Indigenous association or group
- ☐ Local environmental volunteer group (e.g. Friends of, Landcare, naturalist group etc)
- ☐ Network of environmental volunteer groups (e.g. 'Friends of' Network, Conservation Management Network, Landcare Network)
- ☐ Public land committee of management

Which Local Government Area are you in? *

- | | | |
|--|---|---|
| <input type="checkbox"/> Ararat Rural City | <input type="checkbox"/> Horsham Rural City | <input type="checkbox"/> West Wimmera Shire |
| <input type="checkbox"/> Buloke Shire | <input type="checkbox"/> Northern Grampians Shire | <input type="checkbox"/> Yarriambiack Shire |
| <input type="checkbox"/> Hindmarsh Shire | <input type="checkbox"/> Pyrenees Shire | |

Organisation Address *

Address

Suburb State Postcode

Must be an Australian postcode.

Administration contact details

All correspondence will be sent to this person, including letters, emails and funding contracts.

Administration Contact *

First Name

Last Name

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Position in Organisation *

Phone number (business hours) *

Must be an Australian phone number.
Include area code for landlines.

Email *

Must be an email address.

Is this the best person to contact about project queries? *

- ☐ Yes
☐ No, I'd like to nominate someone else

Project contact details

This person will be the point of contact for all queries throughout the project delivery.

Project Contact *

First Name

Last Name

Position in Organisation *

Phone Number (business hours) *

Must be an Australian phone number.
Include area code for landlines

Email *

Must be an email address.

ABN

Does your organisation have an ABN? *

- ☐ Yes
☐ No

Applicant ABN *

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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.

Please tick one of the following reasons for not supplying an ABN. *

- ☐ I/We do not expect to profit or gain from the grant
- ☐ I/We are not running a business and are not entitled to an ABN
- ☐ The grant is exempt income for me/us
- ☐ The grant is for a private recreational pursuit or hobby
- ☐ The grant is for an activity that is wholly of private or domestic nature

If you don't provide this information, the Australian Tax Office requires that we pay them 49% of your grant.

Incorporation

Which of the following registrations does your organisation have? *

- ☐ Affiliation with Landcare Victoria Inc as a member group
- ☐ Incorporated through Consumer Affairs Victoria
- ☐ Incorporation number or ACNC Charity Register Number
- ☐ Registered through the Office of the Registrar of Indigenous Corporations
- ☐ Incorporated through the Crown Land (Reserves) Act 1978
- ☐ None of the above - we will need an auspice

At least 1 choice must be selected.

To check your groups incorporation number; <https://www.consumer.vic.gov.au/clubs-and-fundraising/incorporated-associations/search-for-an-incorporated-association>

**What is your group's incorporation number? (through Consumer Affairs Victoria)
e.g. A1234567B ***

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Insurance

Does your organisation have \$10 million Public Liability Insurance?

- ☐ Yes, as we are insured through Landcare Victoria Inc. (LVI)
- ☐ Yes, we have at least \$10 million Public Liability Insurance
- ☐ Yes, we are a Committee of Management insured through DEECA
- ☐ No, we don't have \$10 million insurance, we will need an auspice

Information for Committees of Management

Through the Victorian Managed Insurance Agency (VMIA) DEECA provides insurance for voluntary committees of management for Public liability (and Products liability), Professional liability (sometimes known as Professional indemnity) and Group Personal Accident (for volunteers including committee members). You can download a copy of the Certificate of Currency [here](#).

Attach your current certificate of insurance *

Attach a file:

Also called Certificate of Currency

Support Grant funding requested

Total amount requested for support grant (up to \$500)

\$

Must be a dollar amount and no more than 500.

Payment details

Please provide your banking details. If you are successful, this will assist the payment process.

Bank Account

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Email for invoice and payment notifications

Must be an email address.

Please note, limits to the bank details fields are set by SmartyGrants. If you need to provide any additional information about your payment details, use the field below

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Section 7 - Auspice details

* indicates a required field

Your responses indicate that you need an auspice, as your organisation is not a legal entity, or does not have \$10 million public liability insurance.

To be eligible as an auspice, your auspicing organisation must:

- be incorporated or a registered Not for Profit or a state government body
- hold a minimum of \$10 million public liability insurance

Your auspice will sign the funding agreement, and be responsible for the delivery of your project. This includes:

- receiving the grant and ensuring the funds are spent correctly
- ensuring your participants are safe while completing the project
- ensuring all reports are completed

Please upload a letter or email showing that your auspice agrees to take responsibility for the grant. *

Attach a file:

Auspice Organisation Name *

Organisation Name

Postal Address *

Address

Suburb State Postcode

Must be an Australian postcode.

Public liability insurance

Public liability insurance typically has an overall cap (often \$10-20 million for community groups). This information can usually be found on your certificate/statement of insurance.

Attach your auspice's current certificate of insurance, which shows at least \$10 million in Public Liability cover. *

Attach a file:

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Auspice administration contact details

Who is the best person to contact for admin matters, such as payments?

Name *

First Name

Last Name

Position in organisation *

Phone Number *

Must be an Australian phone number.
Include "03" for landlines.

Email *

Must be an email address.

Auspice ABN and Incorporation number

Which of the following registrations does your auspice have? *

- ☐ ABN
- ☐ Incorporation number

What is your auspice's 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.

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What is your auspice's incorporation number? (through Consumer Affairs Victoria)
e.g. A1234567B *

Payment details

Please provide your auspice's payment details. If you are successful, this will speed up the payment process.

Auspice Primary Bank Account

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Email for invoice and payment notifications *

Must be an email address.

Please note, limits to the bank details fields are set by SmartyGrants. If you need to provide any additional information about your payment details, use the field below

2023-24 Landcare Group Health Survey

*** indicates a required field**

If your organisation (group, network or other) is supported via the state government's Victorian Landcare Facilitator Program (VLFP), you only need to answer two questions. The standard Group Health Survey questions will be submitted via VLFP annual reporting. Please talk to your Landcare Facilitator or Network to ensure they can collect and report your group's data via VLFP.

If your organisation (group, network or other) is not supported officially through the VLFP, please continue to complete this survey.

Is your Group/ Network officially supported by a DEECA funded Victorian Landcare Facilitator? *

- ☐ Yes
☐ No

What is your DEECA funded Victorian Landcare Facilitator's name? *

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For groups completing multiple applications in this funding round, please indicate if you have already completed this survey. *

- ☐ Yes- we confirm our survey was completed in a previous application
☐ No- we have not yet completed the survey

Start the survey...

This survey is interested in your Landcare activity from 1 July 2023 to 30 June 2024.

The information you provide in this annual survey is vital for understanding the health and challenges of Landcare across Victoria.

Not sure how to answer these questions?

You can take this application including these questions (SAVE PROGRESS) along to a group meeting to discuss before entering the survey data here.

Privacy

DEECA, CMAs and Melbourne Water are committed to protecting personal information provided by you in accordance with the principles of the Victorian privacy laws. The information collected in this form will be used to understand the health of Landcare in Victoria.

Privacy Information about your group, including group website or social media link will be made publicly available. Any personal information about you or a third party in your survey will only be collected by the department for the purpose of administration and collated regional and statewide reporting. This information may be provided to other Victorian government bodies for the purposes of reporting on Landcare and environmental volunteering. If you intend to include personal information about third parties in your survey, please ensure that they are aware of the contents of this privacy statement. Any personal information about you or a third party in your correspondence will be collected, held, managed, used, disclosed or transferred in accordance with the provisions of the Privacy and Data Protection Act 2014 and other applicable laws. DEECA is committed to protecting the privacy of personal information. You can find the DEECA Privacy Policy online at <http://www.DELWP.vic.gov.au/privacy> Requests for access to information about you held by DEECA should be sent to the Manager Privacy, P.O. Box 500 East Melbourne 3002. Alternatively, contact by phone on 9637 8697.

Tell us about your group...

What best describes your group/network type *

Number of individual adult members in 2023-24 *

Must be a number.

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Number of new members in 2023-24 *

Must be a number.

Number of individuals that have been active volunteers in your group over the past 12 months. *

Please note that active volunteers are those that have participated in activities rather than just paid a membership

Please estimate total hours of environmental volunteering these individuals undertook between 1 July 2023 and 30 June 2024 *

Must be a whole number (no decimal place).

Estimate the number of individual people (non-members) who participated in your group's activities *

Must be a number.

Does your group/network use a documented plan to guide its activity? *

- ☐ Yes
☐ No

Volunteer Hours

Of the estimated total hours of environmental volunteering these individuals undertook between 1 July 2023 and 30 June 2024 listed above, please estimate the percentage of time spent on the following activities over the past 12 months.

Percentage of hours spent doing on-ground Natural Resource Management (NRM) projects and works (planting, weed control, pest animal control, fencing, flora and fauna surveys, etc.) *

Must be a number.

Percentage of hours spent doing learning and training (eg guest speakers, training courses, field days, demonstrations) *

Must be a number.

Percentage of hours spent doing administration, planning, decision-making, reporting (eg meetings, people surveys, finance, applying for and reporting on grants etc.) *

Must be a number.

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Percentage of hours spent doing promotion, communications and recruitment for the group (eg newsletters, signage, website maintenance, etc.) *

Must be a number.

Funding

Excluding Victorian Landcare Grants, what funding did your group secure in 2023-24?

Name of grant program(s)	How much funding did you receive?
	\$
	\$
	\$
	\$
	\$
	Must be a dollar amount.

Group priorities

Please choose your groups **Top 3 priorities** for the next two years

Group priorities *

- | | |
|---|---|
| <input type="checkbox"/> Native plants & animals | <input type="checkbox"/> Aboriginal cultural heritage awareness & knowledge |
| <input type="checkbox"/> Vegetation protection & enhancement | <input type="checkbox"/> Traditional Owner inclusion & involvement |
| <input type="checkbox"/> Plants & animals | <input type="checkbox"/> Funding for facilitator support |
| <input type="checkbox"/> Waterway protection | <input type="checkbox"/> Sustainable farm practices |
| <input type="checkbox"/> Threatened species | <input type="checkbox"/> Volunteer recruitment |
| <input type="checkbox"/> Improving land managers skills & knowledge | <input type="checkbox"/> Project funding |
| <input type="checkbox"/> Cultural heritage awareness & knowledge | <input type="checkbox"/> Other: <input type="text"/> |

At least 1 choice and no more than 3 choices may be selected.

Traditional Owner Engagement

In the last twelve months has your group/network engaged with a Traditional Owner group or an Aboriginal organisation? *

- ☐ Yes
☐ No

Which Traditional Owner groups does your group engage with? *

- | | |
|---|--|
| <input type="checkbox"/> Barengi Gadjin Land Council Aboriginal Corporation | <input type="checkbox"/> Martang Pty Ltd |
| <input type="checkbox"/> Bunurong Land Council Aboriginal Corporation | <input type="checkbox"/> Taungurung Land and Waters Council Aboriginal Corporation |
| <input type="checkbox"/> Dja Dja Wurrung Clans Aboriginal Corporation | <input type="checkbox"/> Wadawurrung Traditional Owners Aboriginal Corporation |
| <input type="checkbox"/> Eastern Maar Aboriginal Corporation | <input type="checkbox"/> Wurundjeri Woi Wurrung Cultural Heritage Aboriginal Corporation |

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- ☐ First People of the Millewa Mallee Aboriginal Corporation
- ☐ Gunaikurnai Land and Waters Aboriginal Corporation
- ☐ Gunditj Mirring Traditional Owners Aboriginal Corporation
- ☐ Yorta Yorta Nation Aboriginal Corporation
- ☐ Other:

At least 1 choice must be selected.

Group Health

Select the best description for your group/network

Trail blazers (thriving)

- **Our group has its own identity and strives for excellence.** We are the holder of expert knowledge concerning our area. We are clear on what we are trying to achieve and our role in achieving it. We determine the direction of work ourselves first and then seek suitable sources of resourcing. We know who can offer assistance and we tap into them when needed. We strive to ensure that everyone in the district understands our role and is a member of our group. If any of our committee leaves, others will step up and our group would continue to prosper. We actively seek contacts and knowledge beyond our borders

Rolling along smoothly (strong)

- **We have an action plan that we actively work on.** Our projects tend to be large in scale. Our committee is very motivated and can explain why the group exists, even if other members cannot. We have a broad and active membership. From time to time we actively seek contacts and knowledge beyond our borders. Our activities usually involve other organisations

Moving forward (OK)

- **Our group/network has an action plan, or intends to develop one. We feel we are making progress.** We actively seek assistance from our support person, but we may still be dependent on a dedicated few. We are 'chugging' along, but we are not stretching ourselves right now - we are working within our current capabilities. We are happy within our own group borders - we rarely attend wider meetings or forums. Our activities do not usually involve other organisations to any great extent.

Struggling along with the same dedicated core (surviving)

- **Our activities are often prompted by a funding round or a call from the support person.** Our office bearer positions were difficult to fill. We have few new members. We haven't got around to action planning yet - (or we have one that we don't use). We don't all see the value of action planning. We tend to focus on single issues only, such as weeds or rabbits. We don't always talk about our group with pride.

Just hanging on (stalling or stalled)

- **We don't have an action plan** (or we don't use it). Our meetings are irregular and only a few core members come, (or our meetings are non-existent). We don't really have agreed goals. There are little or no on-ground works happening, and if so it happens in an ad-hoc manner. We rarely talk about our group with pride. We have

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little contact with other groups and organisations and either don't have or don't access external support.

Group health rating *

Thank you. The survey is now complete. Please move to the next page and complete the declaration.

Feedback and Declaration

* indicates a required field

A) Feedback

Your responses to the following questions will not be assessed - they will be used to help us improve our application forms and processes in the future.

How many people worked on this application? *

Must be a whole number (no decimal place).

How many hours did your group spend on this application? *

Must be a whole number

How easy was the application form to use? *

☐ Extremely easy ☐ Very easy ☐ Somewhat easy ☐ Not very easy ☐ Not at all easy

How helpful were the examples and descriptions in the application form? *

☐ Extremely helpful ☐ Very helpful ☐ Somewhat helpful ☐ Slightly helpful ☐ Not at all helpful

Do you have any feedback about the application process? (Optional)

B) Declaration

I understand that successful applicants and auspicing organisations (if an auspice is used) are required to:

- enter into a funding agreement with the Catchment Management Authority
- be responsible for meeting contractual obligations to deliver the project and report on its success by the due date
- have appropriate land manager approval and relevant permits, including planning and cultural heritage

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- adhere to all relevant legislation including Workplace Health and Safety requirements
- acknowledge the Victorian Government funding in publications and promotions
- work with the CMA to identify and promote major project milestones and completion

I declare that:

- all the information in this application and attachments is to the best of my knowledge true and correct
- I will notify the Catchment Management Authority of any changes to this information and any circumstances that may affect this application
- I acknowledge that Catchment Management Authority may refer this application to external experts or other Government Departments for assessment, reporting, advice, comment or for discussion regarding alternative or collaborative grant funding opportunities
- I understand that Catchment Management Authority is subject to the *Freedom of Information Act 1982* and that, if a Freedom of Information request is made, the CMA will consult with the applicant before any decision is made to release the application or supporting documentation
- I acknowledge that if this project is successfully funded, I will consent to my group's/ organisation's details being used for media opportunities
- I understand that this is an application only and may not necessarily result in funding approval
- we will notify the CMA within 14 days if our ABN status, GST status, insurance details or payment details change
- we will maintain \$10 million Public Liability Insurance for the duration of the project
- I am an authorised representative of the group or organisation

If no ABN was provided, I declare that:

- Under pay as you go (PAYG) legislation and guidelines administered by the Tax Office, I am not providing an ABN for this grant for the reason indicated in Section 6.

Acceptance of declaration *

☐ I accept

Name *

First Name

Last Name

Position in organisation *