Hello and welcome to Ocean Health’s Funding Application process. We suggest you complete this form we welcome the opportunity to reviewing your project. Once completed, please submit this form with attachments to support your project to [support@oceanhealth.org.au](mailto:support@oceanhealth.org.au). Email this address too if you require any assistance and thank you for your time to enhance the health of our oceans and the marine life within!

# Section A

# Project summary information

## Project title

|  |
| --- |
|  |

## Project summary

Provide a brief description of the project (word limit 30)

|  |
| --- |
|  |

## Proposed project start and finish dates

|  |
| --- |
|  |

# Contact details

## Applicant details of Organisation / Business

Provide details of the organisation that will manage the project

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organisation or Business name |  | Is your organisation incorporated? | | Yes |
| Postal address |  | | | |
| ABN |  | GST registered? | Yes  No | |
| Website address |  | Social Media | Yes  No | |

## Project Manager / Owner details

Provide details of the project manager for the project, this will be the main contact for the project

|  |  |  |  |
| --- | --- | --- | --- |
| First name |  | Last name |  |
| Salutation | Mr  Mrs  Ms  Miss  Dr  Other: | | |
| Postal address |  | | |
| Email address |  | | |
| Telephone |  | Mobile |  |
| Position title |  | | |
| Website / Social Media links |  | | |

# Please indicate best postal address to use for grant correspondence

## Organisation postal address Yes

Project Manager’s postal address  Yes

# Project team expertise and experience

## Team members

Who will be on the project team and what is their role in this project and their area of expertise?

| Name | Role in this project / expertise | Phone | Email |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Project overview

# Project objectives

What do you plan to achieve? Include information about what will be improved, who or what will benefit from the project? (word limit 250)

|  |
| --- |
|  |

# Benefits to Ocean Health?

Describe the direct benefits to ocean health. What will have improved? (word limit 300)

|  |
| --- |
|  |

# Background, current situation and strategic links

Provide a brief history of the project, the current situation (including details of what problem or issue the project will address) and the need for the project. Research applications should identify what knowledge gap the project seeks to address and how the project outcomes will be relevant to ocean health. (word limit 500)

|  |
| --- |
|  |

# Methodology

How do you propose to carry out the project? (word limit 300)

|  |
| --- |
|  |

How do you propose to acknowledge the contribution of Ocean Health Foundation to your project?

|  |
| --- |
|  |

# Deliverables

Provide a brief list of the tangible products, outcomes and benefits of the project and other long term changes that are sought from undertaking the project.

|  |
| --- |
|  |

# Milestones

Detail how the performance of the project will be measured during the project’s life. Add lines if necessary.

| Milestone description | How will it be measured / what will have been completed? | Delivery date |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |

# Project location / approvals

Detail the location of the project. Include a map if applicable

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Project scale | International National  State | | Which ocean or waterway? | |  |
| For projects of a local scale please complete the section below | | | | | |
| Project site name / address | |  | | | |
| Project nearest town | |  | | Project postcode |  |
| Are you aware of any impediments, legal or otherwise, that may hinder, delay or otherwise adversely affect the timely and successful implementation of the proposed project? Please provide details below | | | | | |
|  | | | | | |

**For funding under AU$10,000 please jump to section C.**

**For funding over AU$10,000 please continue with section B then C.**

# Section B

# Over $10,000 funding information

## Project management and grant funding experience

Provide details (if any) of other grant funded projects you or your organisation and or team has managed. Add more lines if necessary.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Have you or the organisation managed other grant funded projects previously? | | | | | Yes  No |
| Grant source |  | Name of project |  | Completed? | Yes  No |
| Grant source |  | Name of project |  | Completed? | Yes  No |
| Have you or the organisation managed other similar projects to this funding proposal previously? | | | | | Yes  No |
| Provide details |  | | | | |

# Key Stakeholders

Detail all the key stakeholders that will have an impact on the project / or have an interest in the project. Add more lines if necessary.

| Name and/or organisation | Interest or context | How will they be involved or informed during the project |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |

# Communication and extension plan

How will the project be promoted? How will stakeholders be informed of project progress? How will the outcomes of the project be communicated? (word limit 250)

|  |
| --- |
|  |

# Financial management

What financial systems will be in place to manage the project costs and funding? Briefly describe how costs and funding will be managed, including any software tools to be used.

|  |
| --- |
|  |

## Procurement / purchasing plan

What procurement / purchasing rules are in place for purchasing goods and services and costs associated with the project?

|  |
| --- |
|  |

# Section C

# Financials & Submission

# Costs / Budget

Detail the costs of all project items associated with carrying out the project, including those that do not require Ocean Health Foundation funding. Please identify all sources of funding, including ‘in-kind’ contributions. *Note: GST registered organisations should quote GST exclusive costings on all items*

| Project item | Source of funds *(identify funding source including OHF and other contributions)* | Itemised costs *(include all sources of funds and in-kind)*  Budget |
| --- | --- | --- |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
| Totals | All funding sources | $ |
| **Amount requested from Ocean Health Foundation** | **OHF** | **$** |

*Include further rows or columns for additional financial years as needed*

# Other supporting information

Please attached all additional documents and imagery within email.

|  |  |  |  |
| --- | --- | --- | --- |
| Submitted by | | | |
| Name |  | Date |  |

# Submitting the form with best “fishes”!

* **Email to** [**support@oceanhealth.org.au**](mailto:support@oceanhealth.org.au)

Privacy notice: Information collected will not be given to any other third party except where required by law. All information provided will be held by Ocean Health Foundation and will be managed in accordance with provisions under the Privacy and Personal Information Protection Act 1998.

**THANK YOU!**