Eligibility

* indicates a required field

Instructions for Applicants

Before you begin your application please ensure that you have read the <u>Grant Guidelines</u> and <u>FAQ document</u>.

The first section of the application form is designed to help you, and us, understand if you are eligible for this grant (refer to the <u>Grant guidelines</u> for a list of eligibility criteria). It is crucial that you complete all of the eligibility questions before any others to ensure you do not waste your time applying if you are ineligible for this grant.

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

For further information:

Please call 08 8204 9152 during business hours or email <u>dew.wildlifegrants@sa.gov.au.</u>

When your application is lodged you will receive a confirmation email. If you do not receive this, please check you spam or junk folders.

Application Reference

If you need to contact us throughout the application process, please quote the application number below:

Application Number

This field is read only. The identification number or code for this submission.

Confirmation of Eligibility

I confirm that I:

- have read and understand the grant guidelines
- meet the application criteria outlined in the grant guidelines
- do not owe any reports or money to DEW or the Government of South Australia as a result of previous funding or grants

Please select below *

⊖ Yes

 \bigcirc No

Contact Details

* indicates a required field

Applicant Details

The applicant is the organisation or individual leading the grant application. There may be multiple organisations or individuals involved, however, one lead must be listed.

Please submit only one application per individual or project.

I am applying for this grant as an: * O Individual			 Organisation 		
Applica Title	nt Contact * First Name	Last Name			
Organis	ation Name (i	f applicable)			
Applica Address	nt Residential	Address			
Applica	nt Postal Addı	ress			
Address					
Applicant Phone Number *					
Applica	nt Email Addro	ess *			
Must be a	n email address.				
Applica	nt Website (if	applicable)			
Must be a	URL.				

Individual details

For Organisations, please skip to Organisation details below.

Do you have a current wildlife permit which authorises the rescue, rehabilitation, and release or retention of wildlife in South Australia? O Yes O No You must have a current permit to be eligible for this grant

Please provide your SA Wildlife Permit Number:

Click 'Choose Files' to attach a copy of your valid wildlife permit Attach a file:

A valid permit must be uploaded in order for your application to be eligible

Did you hold a permit for the 2023-24 permit period? O Yes O No

If yes, have you completed all permit return requirements for the 2023-24 permit period?

O Yes O No You must have completed any permit return requirements to be eligible

Organisation details

For Individuals, please proceed to the next page.

Position held within organisation (applicant must be a member of the committee):

Does your organisation have an ABN?

O Yes O No Your organisation must be a legal entity to be eligible for this grant

Applicant 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.

Is your organisation registered for GST?

∩ Yes

∩ No

Is your organisation registered with the Australian Charities and Not-for-profits **Commission (ACNC)?** ⊖ Yes O No

Your organisation must be registered with the ACNC to be eligible for this grant

Do you, or a member of your organisation, hold a current wildlife permit which authorises the rescue, rehabilitation, and release or retention of wildlife in South Australia?

∩ Yes

 \cap No

Please provide the SA Wildlife Permit Number:

Click 'Choose Files' to attach a copy of your permit Attach a file:

A valid permit must be uploaded in order for your application to be eligible

Did you hold a permit for the 2023-24 permit period? \cap No

 \cap Yes

If yes, have you completed all permit return requirements for the 2023-24 permit period?

∩ Yes \cap No You must have completed any permit return requirements to be eligible

General Information

* indicates a required field

Purpose of Funding

Please note, funding will only be considered for work undertaken within South Australia, or in relation to the rehabilitation of animals held within South Australia.

Please select the primary purpose of the grant from the below options: *

□ Infrastructure and equipment such as enclosures, incubators, shelters and portable cages

- □ Food for native wildlife
- □ Veterinary fees

□ Training and conference attendance fees for carers (including first aid training and wildlife rehabilitation courses)

- □ Personal Protective Equipment
- □ Vaccinations (where applicable)
- □ Research related to rescued wildlife
- □ Other (please specify below)

Funding

Amount requested (GST exclusive) *

Must be a number and no more than 5000.

Please upload a copy of all quotes you have received for the items or activities requested, or other evidence of cost (such as a screenshot of item prices) Attach a file:

Species of native wildlife that the grant will support

Please provide a list of species relevant to this application below: *

Project outcomes

The objectives of the grant program are to:

- 1.Support the wildlife rescue and rehabilitation sector by increasing their ability to respond to and care for sick, injured and orphaned wildlife by providing funding for items which directly assist in the provision of these services; and
- 2.Improve animal welfare outcomes for sick, injured or orphaned wildlife in South Australia.

Please describe how the funding will assist you or your organisation to meet the objectives of the grant program: *

Please upload any other documentation in support of your application (if desired) Attach a file:

Review

* indicates a required field

Review

Please ensure that you have competed all relevant fields of the application and attached all requested documentation.

Incomplete applications will not be considered for funding.

Declaration

- I declare that to the best of my knowledge the statements made within this application are true and correct.
- I understand that if the applicant (individual or organisation) is approved for this grant, they will be required to accept the terms and conditions of the grant as outlined in the grant agreement in order for the grant to progress.

l agree: *

O Yes O No Please note, if you select "No" your application may be submitted but will not be considered for funding.