



Small Grant Program - Application form 2024

Organisation					
Legal name of organisation:		Click here to enter text.			
Trading name (if applicable):		Click here to enter text.			
Post	al address:	Click here to enter text.			
Entity	type:				
	Incorporated association			Not-for-profit trust	
	Not-for-profit organisation	า		Local government	
	State government			Other (please specify):	

Click here to enter text.

Contact person

Name of contact person:	Click here to enter text.
Position:	Click here to enter text.
Phone number:	Click here to enter text.
Email:	Click here to enter text.

Activity/event

Activity/event title (include the words 'maternal mental health', if possible):

Click here to enter text.

Description of activity (include event date)

Click here to enter text.				
Aim				
Tick the boxes below to indicate the aim of your proj	iect			
1. Raise awareness of perinatal mental health b	y increasing knowledge of:			
\square signs/symptoms of perinatal mental he	alth conditions such as depression, anxiety,			
psychotic and bipolar disorders etc;				
$\ \square$ self-care strategies for the prevention (of mental health conditions and			
maintenance of wellbeing/recovery;				
☐ where to access support eg. health/so	$\hfill \square$ where to access support eg. health/social services organisations and their staff,			
websites/apps/telephone support lines.				
2. Provide opportunities for mothers, fathers, parents and families to connect with:				
\square other mothers, fathers, parents and fan	nilies;			
\square local health/social services and staff where \square	no support families during the perinatal			
period.				
Target				
Tick the boxes below to indicate the primary target a	audience for your activity/event			
People	Perinatal stage			
☐ Women	☐ planning a baby			
☐ Men	□ expecting a baby			
☐ Parent	☐ have a baby			
☐ Families				
Anticipated number of adult attendees:				
Click here to enter text.				

Locat	ion						
What	region will your project run in?						
	Gascoyne		Goldfields/Esperance				
	Great Southern		Kimberley				
	Midwest		Peel				
	Pilbara		South West				
	Wheatbelt		Perth metropolitan				
Town/	/Suburb name/s of activity/event:						
Click	Click here to enter text.						
Promotion							
How will your agency promote your activity?							
	□ Newsletters						
	Radio						
	Newspaper						
	Social Media (including Facebook, Twitter, Instagram, etc.)						
	□ Other – please describe in box below						
Click here to enter text.							

Budget

Itemised budget (please include funding from other sources or in-kind support):

Item	Amount (\$) GST inclusive	Notes
eg. food, presenter, yoga teacher		eg. presenter – in-kind support eg. Food - sandwiches and fruit
Click here to enter text.	\$ click to enter amount	Click here to enter text.
Click here to enter text.	\$ click to enter amount	Click here to enter text.
Click here to enter text.	\$ click to enter amount	Click here to enter text.
Click here to enter text.	\$ click to enter amount	Click here to enter text.
Click here to enter text.	\$ click to enter amount	Click here to enter text.
Click here to enter text.	\$ click to enter amount	Click here to enter text.
TOTAL	\$ click to enter amount	Click here to enter text.

Notes:

- Your event must be provided free of charge to participants.
- Childcare/crèche for participants can be included as part of your budget.

Partnerships

List any other agencies you have engaged with in writing this application or will be working with for your activity/event.

Click here to enter text.			
Official to the officer toxt:			

Living with COVID

Please ensure any planned activities consider infection prevention and control measures such as hand hygiene, cough etiquette, physical space and advising those with influenza like illness to stay at home.

For latest information and resources on COVID-19, please refer to websites: WA Health and COVID-19 resources.

Reporting requirements

Please be aware that you will be asked to provide a brief report on the following outcomes of your activity:

- 1. Number of adult participants at your activity.
- 2. Number of resources/information packs distributed at your activity.
- 3. Number of newspaper, radio, television and/or online news stories about your activity (providing evidence, where possible).
- 4. Number of, and engagement with, social media posts (e.g., Facebook, Twitter, Instagram) about your activity.
- 5. Any anecdotal feedback.
- 6. Budget acquittal.

You will als	o be invited to	contribute a	short article	about your	activity	(and photos)	to the
Perinatal ar	nd Infant Ment	al Health Nev	ws and Even	ts newslette	er.		

Perina	atal and Infant Mental Health News and Events newsletter.			
	Please check this box to indicate you understand the reporting requirements.			
Grant conditions				
The grant conditions are detailed in Appendix 1 of this document.				
	Please check this box if you have read the grant conditions.			

Approvals

Endorsed by Manager:



Name: Click here to enter text.	
Signature:	

Please email completed grant application form to spimhp@health.wa.gov.au

Key dates

Applications close	31January 2024
Applicants notified of success	29 February 2024
Activities/events held	Around 1 May 2024
Acquittal and evaluation to be returned	14 June 2024

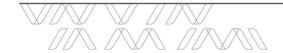
Assessment criteria

Each application will be assessed against the following criteria

- Held on or around World Maternal Mental Health Day
- Free for participants
- Meets one or more of the aims listed on page 1
- Works in partnership with other relevant organisations
- Value for money

Appendix 1 - Grant conditions

- 1. The grant is to be used solely for the specified purpose approved by the Grantor during the funding period.
- 2. Any part of the grant monies that are not used in accordance with Condition 1 must be repaid to the Grantor unless written approval is obtained from the Grantor.
- 3. If the Organisation ceases carrying out the activities for which the grant was made or if the Grantor terminates the arrangement on account of the Organisation's breach or breaches of these Conditions, then:
 - (a) the balance of the grant monies unspent must be repaid to the Grantor; and
 - (b) any property acquired with the grant monies must be transferred to another not-for-profit organisation with similar objects and purposes to the Grantee organisation, provided prior approval has been given by the Grantor.
- 4. An Organisation provided with grant monies does not entitle them to receive any further grant monies.
- 5. The Grantor will not be held responsible for the success of the approved purpose for which the grant is applied for or for any losses or additional costs incurred that are associated with the approved purpose.
- 6. Organisations must comply with all Local, State and Commonwealth laws applicable to the approved purpose.
- 7. If an Organisation wished to change the approved purpose or seek an extension of the funding period, the Organisation must obtain the Grantor's prior written approval.
- 8. If an Organisation commits a breach of any of these terms and conditions, the Grantor can terminate the arrangement at any time and without giving the Organisation any prior notice.
- 9. The Organisation must provide all documents or information relating to the grant or the approved purpose within ten (10) business days of receiving the request from the Grantor.
- 10. Organisations must meet any payment conditions and/or reporting requirements as specified by the Grantor.
- 11. Organisations must allow the Auditor General for the State of Western Australia, or an authorised representative, to have access to and examine an Organisations records and information concerning the grant.
- 12. The total grant payment provided by the Grantor includes an amount to cover any liability for GST, if applicable.
- 13. (a) For the purpose of clause 12:
 - (i) "GST" means the goods and services tax applicable to any taxable supplies as determined by the GST Act; and
 - (ii) "GST Act" means A New Tax System (Goods and Services Tax) Act 1999 (Cth) and include all associated legislation and regulations;
 - (iii) the terms "supply", "tax invoice", "taxable supply" and "value" have the same meanings as in the GST Act.
 - (b) If the supply of anything under this Agreement is a taxable supply under the GST Act, the Grant Funds shall be inclusive of GST.
 - (c) The obligation of the Grantor to pay the GST on any supply by the Organisation under this Agreement is conditional upon the prior issue by the Organisation to the Grantor of a tax invoice, which complies with the GST Act. This provision applies notwithstanding any law to the contrary.



- (d) If the parties agree that the Grantor will issue the Organisations with a Recipient Created Tax Invoice (RCTI), then the parties hereby agree that:
 - (i) the Grantor will issue a RCTI in respect of GST Payable on the supply of the Project and the Organisation will not issue tax invoice in respect of that supply;
 - (ii) The Organisation warrants that it is registered for the purposes of GST and the Organisation will notify the Grantor in writing if it ceases to be registered for the purposes of GST during the term of the Agreement ('the Term');
 - (iii) The Grantor warrants that it is registered for the purposes of GST and the Grantor will notify the Organisation in writing if it ceases to be registered for the purposes of GST, or if it ceases to satisfy the requirements of the GST Act during the Term; and
 - (iv) The Grantor will indemnify and keep indemnified the Organisation for GST and any related penalty that may arise from the understatement of the GST payable on the supply of the Project for which the Grantor issues a RCTI under the Agreement.



We are proud to be a smoke-free site.

Thank you for not smoking or vaping in any buildings or on our grounds.

This document can be made available in alternative formats on request.

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