Form Preview

Everyday Legal Grant application

* indicates a required field

Objectives

Everyday Legal Grants support projects that help the community to navigate the justice system and access relevant and accessible legal information.

Eligibility checklist

Before proceeding, please check that you are eligible to apply for an Everyday Legal Grant.

If you are unsure or unable to meet all of the following criteria, please contact the Grants Manager at grants@victorialawfoundation.org.au to discuss your proposal.

Grants criteria *
$\ \square$ The applicant is a community legal organisation or NFP community organisation with a
legal partner
☐ The proposal addresses an area of civil law or will help Victorians navigate the justice
system
☐ The project will primarily benefit Victorians
Applicant details
Organisation name
Organisation Name

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 Bus	iness Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	

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Key Contact email

Main business location		
Must be an ABN.		
Address Address		
Website		
Must be a URL.		
Applicant Organisati	on type *	
Contact details		
Head of Organisation First Name	n * Last Name	
Head of Organisation	n Position	*
neda or organisation		
Head of Organisation	n nhone *	
nead of Organisation	i pilone	
Must be an Australian pho	one number.	
Head of Organisation	n email *	
Must be an email address		
	•	
Key Project Contact First Name	Last Name	
Key Contact Position	1	
Key Contact phone		
s, ssings pilone		
Must be an Australian pho	one number.	

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Must be an email address.			
Must be all ellial address.			
Project overview			
* indicates a required field			
Project summary			
Project Title *			
r roject mile			
Short project description *			
, ., .,			
Word count:			
Provide a short description of you	ır project (100 wo	ords)	
Project start date *			
Must be a date.			
Project end date *			
Must be a date.			
Total Amount Requested *			
Up to \$10,000 excluding GST.			
Beneficiaries - who is expe ☐ Aboriginal and Torres Strait ☐ Culturally and linguistically ☐ Children/young people ☐ LGBTI+ people ☐ Older people	t Islander peopl	e□ People with □ People with	a disability experience of family violence /als/asylum seekers
☐ People experiencing disadv Please specifiy the group/s that y			
Area of law - what is the m			
 Consumer - credit and debt Discrimination Employment Family violence 		nts d tenancy n	Legal systemProcesses and systemsLegal practiceOther:
Fines and infringements	 Social secur 	rity	

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Project description
* indicates a required field
Project details
What is the purpose of the project or activity? *
What problem are you trying to overcome? Include legal need and evidence where available (Up to 400 words)
What are the key project activities? How will you ensure the project meets the needs of the audience? *
How the project activities will support the purpose and intended outcomes. (Up to 400 words)
What are the expected outcomes of the project? *
(Up to 400 words)
Is there anything else you would like to tell us to support your application?

This might include past projects, your expertise or experience working with the audience group or in the area of law.

Partnerships

Partner details

We encourage partnerships and collaboration with other organisations to explore a shared issue or need or where a partner can provide specialist information or expertise in a specific area.

Community organisations are required to partner with a legal service to ensure accurate legal information is provided to the audience group.

Please only provide details of project partners which will contribute to the project.

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You may attach letters of support from stakeholders and/or partners in document upload section (this is optional).

Partner					
○ Individ	ual	Organisa	ition		
Organisation Name					
J					
Title	First Name	Last I	Name		
Dawtman	Duimon us Ch	ana Numba			
Partner	Primary Ph	one Numbe	er		
Must be a	n Australian pl	none number			
Partner	Primary Em	nail			
Must be a	n email addres	SS.			
Partner Primary Website					
Must be a URL.					
Outline how this partner will contribute to the project?					

Budget

Budget

Please include all income and expenditure. This helps us understand the true cost of delivering the project.

Budget information is used to assess your application so please include detailed information where possible.

Income

Include:

- the amount you are requesting from Victoria Law Foundation
- other grants (include grants you have applied for and/or secured)
- cash contributions from your organisation
- in-kind contributions.

Expenditure

Budget items might include:

salaries (hrs/rates/time period)

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- consultant or consultation fees
- administration costs
- project costs, e.g. design, focus or reference group costs, resource development, marketing, interpreters
- evaluation.

Income (excl. GST)	\$ Expenditure (excl. GST)	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

Budget Totals

otal Income Amount Total Expenditure Amount		Income - Expenditure	
\$	\$	\$	
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.	

Document upload

Please attach or link to any documents to support your application. This might include a detailed project plan or budget, quotes, monitoring and evaluation framework, or letters of support from partners or stakeholders. This is optional.

If we need more information to assess your application, we will contact you.

Support material Attach a file:	
A maximum of 3 files may be attached.	
Link to website	
Must be a URL.	

Declaration

* indicates a required field

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I declare that the information in this application and any attachments are to the best of my knowledge true and correct and I am authorised to submit the application on behalf of the organisation.

I consent to Victoria Law Foundation referring this application to third parties to assist the assessment of this application.

I consent to my contact details being used by Victoria Law Foundation to keep me up to date about activities and events.

I have the authorized the declaration. * O Yes	ority to submit this app	lication and have read and understand the
Name First Name	Last Name	
Position		
Date		
Feedback		
	any feedback about you rove our grant processe	ur experience applying for a grant that
VLF emailVLF websiteSocial media	nd out about this year's plied for a grant	grant opportunity?