

2027 Women's Week EOI

Form Preview

About the grant

* indicates a required field

Instructions for Applicants

Before completing this form, please read the [Women's Week Guidelines PDF version](#) or [Women's Week Guidelines - Word version](#).

To streamline your time and resources, we ask you to complete this short expression of interest (EOI).

Incomplete EOIs, multiple EOIs, EOIs from ineligible organisations and/or EOIs received after the closing date will not be considered.

Application Number

This field is read only.

Purpose and objectives

NSW Women's Week celebrates the contributions of women from all backgrounds and promotes gender equality across NSW.

Women's Week Grants fund events held during Women's Week that advance gender equality by:

- increasing the empowerment and participation of women and girls in our communities
- celebrating and strengthening focus communities
- challenging gender stereotypes, roles and expectations

In 2027, NSW Women's Week will run from **Tuesday 2 March to Monday 8 March 2027**, aligning with International Women's Day on 8 March 2027.

Grant Program Name

This field is read only.

The program this submission is in.

Disclaimer

By submitting this Expression of Interest (EOI), you understand that:

- submitting this EOI does not guarantee funding, and The Cabinet Office may accept or reject the application at its discretion

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- **feedback will not be provided for unsuccessful EOIs**

- the Applicant is responsible for all costs of preparing and submitting the application, and The Cabinet Office is not liable for those costs, whether the application is accepted or rejected and
- you have read the [Women's Week Guidelines](#) and understand the program requirements.

*

☐ I understand and agree

Use of Information

By submitting this application form, the Applicant acknowledges and agrees that:

- if this project application is successful, the relevant details of the project will be made public, including details such as the names of the organisation (Applicant) and any partnering organisation (state government agency or non-government organisation), project title, project description, location, anticipated time for completion and amount awarded;
- The Cabinet Office will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-in-confidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the Government Information (Public Access) Act 2009 (NSW) (GIPA Act); and
- in some circumstances The Cabinet Office may release information contained in this application form and other relevant information in relation to this application in response to a request lodged under the GIPA Act or otherwise as required or permitted by law.

Privacy Notice

Please review the [Privacy Statement from The Cabinet Office](#).

By submitting this EOI form, the Applicant confirms that:

- The Cabinet Office must follow the Privacy and Personal Information Protection Act 1998 (NSW) (Privacy Act). Any personal information collected for this program will be handled in line with the Privacy Act and its privacy policy, available at: [Privacy and Personal Information Protection Act 1998](#).
- Any information provided in this application will be collected and stored in a database. It will only be used for the purpose it was collected for, including sharing it with other government agencies if needed to assess the application, or as otherwise allowed by the Privacy Act.
- The Applicant has made sure that anyone whose personal information is included in this application has agreed to it being shared with The Cabinet Office and other

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government agencies, and understands why that information was collected and how it may be used.

*

☐ I understand and agree

Organisation Details

* indicates a required field

Does the applicant have an Australian Business Number (ABN)? *

☐ Yes ☐ No

Applicant Organisation 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.

Unfortunately if you do not have an ABN you are ineligible for this grant. Please click here to confirm you understand you cannot apply and your application will not be accepted.

I understand that if I do not have an ABN I cannot apply for this grant. *

☐ Yes

Eligibility

* indicates a required field

Who can't apply

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Applicants are not eligible if they are:

- An individual or group of individuals, including sole traders
- Insolvent
- A sub-contractor for the event – either for program management or for project delivery on behalf of non-eligible organisations
- A trust or trustee
- A partnership
- A federal, state, territory or local government agency or body (including public trusts and government business enterprises)
- Receiving or have received NSW, Commonwealth or other State Government funding for the proposed project or a similar project
- Applicants requesting 100 percent of project funding from Women NSW
- Applicants with outstanding acquittal requirements with Women NSW
- NSW Government schools, Area Health Services and public hospitals.
- An incorporated not-for-profit body, such as a Parents and Citizens Association or hospital auxiliary is eligible subject to meeting the eligibility criteria in Section 2 of the [Guidelines](#).
- Applicants with Redress Obligation (or the Related Entity of an organisation with Redress Obligation) under the National Redress Scheme for Institutional Child Sexual Abuse who have not joined the Scheme (see Section 2.6 of the [Guidelines](#))

2027 Women's Week Eligible Organisations

Applicant organisation is one of the following Australian-based incorporated legal entities: *

- ☐ Not-for-profit organisation
- ☐ Aboriginal and / or Torres Strait Islander Community-Controlled Organisation (ACCO)
- ☐ Aboriginal and Torres Strait Islander corporation

Choose the most appropriate choice - only one choice allowed

Requirements for Not-for-Profit organisations

For the purpose of this grant, an organisation will be considered not-for-profit if it falls within at least one of the following categories:

Tick all that apply to your organisation *

- ☐ Charities registered on the Australian Charities and Not-for-profits Commission (ACNC)
- ☐ Incorporated associations registered on the NSW incorporated associations register maintained by NSW Fair Trading
- ☐ Non-distributing co-operatives registered on the NSW register of co-operatives maintained by NSW Fair Trading under the Co-operatives (Adoption of National Law) Act 2012 (NSW)
- ☐ Not-for-profit, public companies limited by guarantee
- ☐ A Local Aboriginal Land Council constituted under the Aboriginal Land Rights Act 1983 (NSW)

At least 1 choice must be selected.

You must nominate at least one category. The ABN lookup in the previous section confirms: your organisation's entity type; whether your organisation is a charity; whether your organisation is registered with the ACNC.

Associations

Please list your incorporation number on the NSW Incorporated Associations Register *

Please upload a screen shot of your organisation's record on the NSW Incorporated Associations Register *

Attach a file:

1 file must be attached.

[NSW Incorporated Associations Register](#)

Non-distributing co-operatives

What is your non-distributing co-operative number: *

[Co-operatives and Others Register](#)

Requirements for Aboriginal / Torres Strait Islander Community-Controlled Organisations (ACCOs)

For the purpose of this grant, an Aboriginal and/or Torres Strait Islander Community-Controlled Organisation (ACCO) must deliver services that strengthen and empower Aboriginal and Torres Strait Islander communities and people and also be:

Please confirm you are: *

- ☐ Incorporated (provided that if it is an incorporated association, it is registered on the NSW incorporated associations register maintained by NSW Fair Trading)
- ☐ Not-for-profit
- ☐ Controlled and operated by Aboriginal and / or Torres Strait Islander people
- ☐ Connected to the community or communities in which they deliver services
- ☐ Governed by a majority Aboriginal and / or Torres Strait Islander governing body

At least 5 choices must be selected.

You must confirm all of the above.

Aboriginal and Torres Strait Islander corporations

For the purpose of this grant, Aboriginal and Torres Strait Islander corporation means a corporation registered on the [Register of Aboriginal and Torres Strait Islander Corporations](#) maintained by the [Office of the Registrar of Indigenous Corporations](#).

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What is your Office of the Registrar of Indigenous Corporations ICN number: *

[ORIC Register](#)

Contact Details

* indicates a required field

Please select ORGANISATION (not individual) BELOW

Individuals are not eligible to apply. **If you select "Individual" below, your EOI will be ineligible.**

Applicant Details

Applicant *

☐ Individual ☐ Organisation

Organisation Name

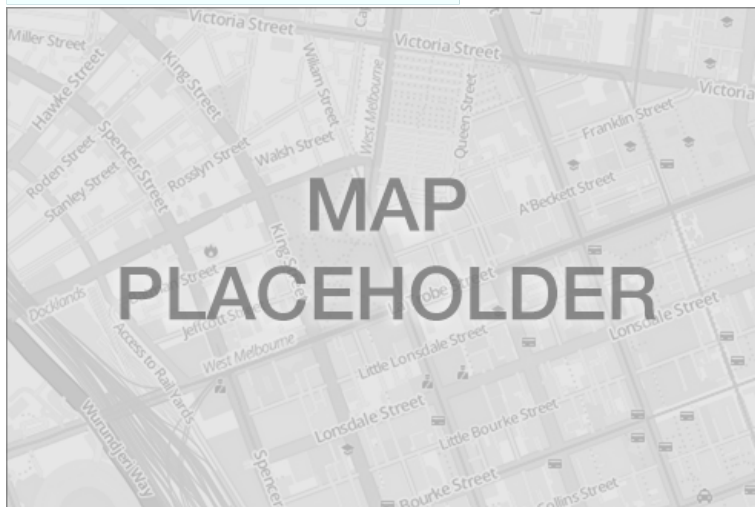
Title First Name Last Name

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For organisations: please use the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Applicant Primary Address

Address



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Applicant Postal Address

Address

Applicant Primary Phone Number *

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Must be an Australian phone number.

Country code not required, area code for landlines is required.

Applicant Email Address *

--

Must be an email address.

Applicant Website

--

Must be a URL.

Primary Contact Details

Primary Contact *

Title First Name Last Name

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This is the person we will correspond with about this grant.

Primary Contact Position *

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e.g., Manager, Board Member or Fundraising Coordinator.

Primary Contact Phone Number *

--

Must be an Australian phone number.

Country code not required, area code for landlines is required.

Primary Contact Other Phone Number

--

Must be an Australian phone number.

Country code not required, area code for landlines is required.

Primary Contact Email *

--

This is the address we will use to correspond with you about this grant.

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You selected "Individual" in the Applicant Details section above.

Individuals are **ineligible** to apply for this grant, only ORGANISATIONS can apply.

If you do not change this your EOI will be ineligible.

I understand and agree that individuals are not eligible and my EOI will not be assessed. *

☐ I understand and agree

Alternative Contact (not to be the same as primary contact)

Applicant Project Contact *

Title First Name Last Name

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Applicant Project Contact Position *

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Applicant Project Contact Mobile Phone Number *

--

Must be an Australian phone number.

Applicant Project Contact Primary Email *

--

Must be an email address.

Event Details

* indicates a required field

Assessment Criteria

NOTE: the answers to the following questions in form pages '**Event Details**' and '**Budget**' will be assessed against the criteria below.

Criteria

Details

1. Focus community connection

Organisations with strong, ongoing links to their focus community, and clear evidence of why the event is needed, will score higher.

EOIs from ACCOs and Aboriginal and Torres Strait Islander corporations for events for Aboriginal and Torres Strait Islander women and girls will be considered to have stronger community connections.

2. Organisational capacity

Organisations that can show they have run similar inclusive events for their chosen community will score higher.

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3. Event location

Events in rural, regional and remote NSW will be given priority.

4. Nature of the event

Events that are free or low cost, original, interactive, educational and enjoyable, and that help participants connect, will score higher.

We encourage events that pay female artists fairly and highlight women performers, artists, athletes or leaders, especially from focus communities.

5. Value for money

Events that show clear benefits for participants and good value for the funding requested will score higher.

6. Alignment with Women's Week Program objectives

Events that empower women, support focus communities, and challenge gender stereotypes and expectations will score higher.

Title *

Word count:

Must be no more than 250 characters no more than 20 words.

Provide a name for your event. Your title should be short but descriptive.

Brief description *

Word count:

Write a brief description of your event (must be no more than 50 words).

Anticipated start date *

Must be a date and between 2/3/2027 and 8/3/2027.

Anticipated end date *

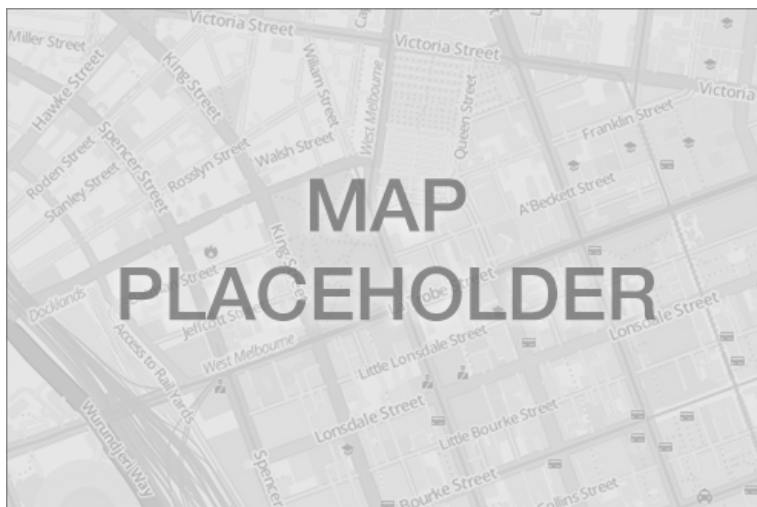
Must be a date and between 2/3/2027 and 8/3/2027.

Primary location of your initiative

Address

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Primary location: please provide a specific address, including: postcode, suburb, state (NSW), etc. If delivered online, please specify the area of focus for delivery.

Priority for events in regional, rural, remote NSW

To support the geographic spread of events, priority will be given to funding events in a range of locations across NSW, including regional, rural and remote areas.

For the purpose of this grant, 'regional NSW' means all parts of NSW outside Greater Sydney, Newcastle and Wollongong.

Women NSW Focus Communities

Which one of these focus communities will your event predominantly target? *

- ☐ Aboriginal and Torres Strait Islander women and girls
- ☐ Carers
- ☐ Girls and young women living in or who have lived in out of home care
- ☐ Lesbian, gay, bisexual, trans, intersex, queer and/or asexual (LGBTIQA+) women and girls
- ☐ Older women
- ☐ Women and girls experiencing socioeconomic disadvantage
- ☐ Women and girls facing homelessness
- ☐ Women and girls from culturally and linguistically diverse (CALD) backgrounds
- ☐ Women and girls in contact with the criminal justice system
- ☐ Women and girls living and/or working in regional, rural and remote areas in NSW
- ☐ Women and girls with disability
- ☐ Women and girls with a mental illness
- ☐ Women and girls who have a history of, or are currently experiencing domestic, family or sexual violence

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- ☐ Women veterans
- ☐ Young women (18 - 24 years)

No more than 1 choice may be selected.

Please select the community that is the main focus of your event.

NSW Women's Strategy Pillars

Which of these three pillars does your event address? *

☐ Economic opportunity and advancement ☐ Health and wellbeing ☐ Participation and empowerment

Women's Week Event

Write succinctly (feel free to use dot points) and answer:

- **Who is your event for?**
- **What will your event be/do?**
- **Where will your event be held and why?**
- **Why should this event be funded?**
- **Why are you able to deliver this event better than others?**
- **What will change as a result of your event?**

What is your event and why should it be funded? *

Word count:

Must be no more than 300 words.

Events which empower women, uplift focus communities and challenge gendered norms, roles and expectations will score more highly.

How will your event benefit women and girls in NSW? *

Word count:

Must be no more than 300 words.

Describe three things you want the project to achieve in terms of benefits for participants and/or others (200 words recommended)

Budget

* indicates a required field

Eligible and ineligible expenditure

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Women's Week Grants must only be used for expenses directly related to the development and delivery of the event or activity, such as:

- Resource materials and publication costs including art supplies, workbooks
- Equipment, transport and venue hire
- Publicity, communications and marketing activities and materials including photography/videography
- Catering costs, food and non-alcoholic beverages for community engagement activities
- Staff, contractors and consultants, where the costs are for direct event delivery only
- Guest speaker / performer / artist / coach fees
- Travel costs within NSW exclusively for the purpose of the event
- Evaluation activities

Items **not eligible** for grant expenditure:

- Expenses not directly related to the development and delivery of the event or activity
- Business capital or start-up funding
- Purchase of, or cost of infrastructure, assets and/or capital equipment and works
- Permanent equipment purchases (e.g. computers, phones or iPads or other items not specific to the event)
- Operating costs of the organisation or recurrent expenses (e.g. insurance, leases, bills, general office consumables and disposables)
- Permanent staff pay and related costs
- Organisational development costs for internal staff (e.g. staff training, conferences, workshops, planning days)
- Prizes, competition or awards (e.g. cash giveaways, lucky door prizes, raffle prizes)
- Interstate and/or overseas travel costs
- Costs associated with membership of boards/councils
- Retrospective costs (any money spent before a grant is approved)
- Fundraising events that are for the purposes of fundraising for charities or for the organisation's personal use.
- Political events or activities which promote or support a political party
- Events that are run solely for commercial purposes to the benefit of the delivery partner but not the program participants
- Events and activities coordinated by NSW government sector agencies
- Research projects which are co-funded by State or Federal Governments and/or other organisations
- Purchase of promotional/awareness raising merchandise that will be sold for profit
- Fees associated with an auspice agreement
- Existing debt or loan repayments
- Events that encourage gambling (e.g. raffles, bingo) or the consumption of alcohol
- Non-essential costs which are not related to the proposed core activity

Number of Participants

Approximately how many participants do you expect will directly engage with, and benefit from this event and/or activity?

Must be a number.

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Event funding

Total grant amount requested = How much you are requesting from Women NSW for your event (must be between \$10,000 - \$50,000).

Co-contribution amount = Your financial or in-kind contribution to the event costs (must be at least 10% of the total amount requested).

Please add these amounts in the section below.

Total grant amount requested *

Must be a whole dollar amount (no cents) and between 10000 and 50000.
What is the total financial support you are requesting in this application?

Co-contribution amount *

Must be a whole dollar amount (no cents).

Your co-contribution %

This number/amount is calculated.
Must be at least 10 percent.

Declaration and Authorisation

* indicates a required field

EOI confirmation

If your EOI is successful, you must be able to confirm the following in the full grant application stage:

I confirm: *

- ☐ I will obtain appropriate public liability insurance (minimum of \$10 million) to run a Women's Week event if successful.
- ☐ I will provide details of the event budget outlining proposed expenditure of eligible items
- ☐ The application will provide details of your co-contribution (monetary or in-kind) towards the cost of the event equal to at least 10 per cent of the funding requested.
- ☐ I will complete a run sheet with a detailed break down of how the event will be run
- ☐ The application will be submitted by one organisation that will take responsibility for delivering the event if funding is approved
- ☐ My organisation is based within NSW, or I can demonstrate the event will be run in and for the benefit of women and/or girls in NSW and that the organisation meets all regulatory, business requirements.
- ☐ The event will be held during Women's Week in March 2027

At least 7 choices and no more than 7 choices may be selected.

Declaration

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The Applicant represents and warrants that this application has been submitted by an authorised representative of the Applicant (e.g. CEO, Chief Financial Officer, General Manager, Director, Chair of the Board, President, authorised manager etc).

Where this Application is submitted in the course of employment by a representative of any kind (e.g. authorised representative or agent) of the Applicant, you: (i) acknowledge and agree that the Applicant is deemed to be jointly and separately bound by this application; and (ii) represent and warrant that you have the authority to represent and bind the Applicant as contemplated by this provision.

By submitting this application form I hereby declare that:

- I agree for my project to be automatically considered in other NSW funding programs;
- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge;
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application;
- I am authorised to submit this application on behalf of, and have the authority to represent and bind the Applicant;
- I understand that any false declaration may render this application ineligible/invalid; and
- All relevant conflicts of interest have been declared

Registered name of organisation *

This is the name that will be used in publicity regarding this grant. You can confirm the registered business name on the [ASIC website](#). Please check spelling and capitalisation carefully. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Authorisation

I agree *

☐ Yes

Name of authorised person *

Title First Name Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

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Email *

Must be an email address.

GMS-TSG/2025 v2.0

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Your responses here will not affect the outcome of your application in any way.

How did you find the online application process? *

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very difficult

Please consider time spent by all people involved in reading information about the grant, preparing your project and proposal in your organisation, and drafting and submitting the EOI application form.

How many minutes in total did it take you to complete this application? *

Must be a number.

Estimate in minutes i.e. 1 hour = 60

- What did you find most challenging in preparing your EOI application?
- What did you find most helpful in preparing your EOI application?
- Is there anything else you would like to share with us about submitting an EOI application for this grant?

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.