Form Preview

About the grant

Instructions for Applicants

Before completing this Expression of Interest (EOI) form, you should read the Return to Work Pathways Program Guidelines (Word version and pdf version)

Please ensure you submit your completed EOI by 3pm AEDT on 6 December 2024.

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

To streamline your time and resources, this year we are first seeking an expression of interest from organisations seeking to deliver a project funded under the Return to Work Pathways Program.

Application Number	
This field is read only.	

Purpose and objectives

The Return to Work Pathways Program (RTWPP) was established by the NSW Government in 2023 to support women from focus communities gain increased work readiness and to secure sustainable employment. The RTWPP delivers on NSW Government priorities including the NSW Women's Strategy 2023 - 2026.

The primary objective of the RTWPP is to support women from focus communities, who are experiencing complex and persistent barriers to employment, to enter or re-enter the workforce.

The 2024-25 RTWPP grants are specifically targeting eight priority cohorts of women experiencing low workforce participation and / or high unemployment rates, combined with complex intersectional barriers to employment.

Applications for the 2024-25 RTWPP grants must target and demonstrate outcomes for one of the following cohorts of women:

- Aboriginal and Torres Strait Islander women
- women with disability
- carers
- young women (17-24 years)
- older women (55 years and over)
- women from culturally and linguistically diverse communities
- women living in regional, rural, and remote areas (particularly Far West NSW and North Western NSW)
- women living in Western Sydney

A variety of bespoke and tailored projects will be funded, to provide wraparound supports including training, mentoring and pathways to employment.

Form Preview

Please refer to the Return to Work Program Guidelines (<u>Word version</u> and <u>pdf version</u>) for more information.

Grant Program Name

This field is read only.
The program this submission is in.

Disclaimer

The Applicant acknowledges and agrees that:

- submission of this Expression of Interest does not guarantee funding will be granted for any project, and the Department expressly reserves its right to accept or reject this application at its discretion;
- they must bear the costs of preparing and submitting this application and the Department does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- they have read the Return to Work Pathways Program Guidelines and have fully informed themselves of the relevant program requirements.

Use of Information

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

- if this 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 Department will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-inconfidence' 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 Department may release information contained in this 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

Form Preview

Please review the **Privacy Statement from The Cabinet Office.**

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

- The Cabinet Office is required to comply with the *Privacy and Personal Information Protection Act 1998* (NSW) (the Privacy Act) and that any personal information (as defined by the Privacy Act) collected by The Cabinet Office in relation to the program will be handled in accordance with the Privacy Act and its privacy policy;
- the information they provide to The Cabinet Office in connection with this application will be collected and stored on a database and will only be used for the purposes for which it was collected (including, where necessary, being disclosed to other Government agencies in connection with the assessment of the merits of an application) or as otherwise permitted by the Privacy Act;
- they have taken steps to ensure that any person whose personal information (as defined by the Privacy Act) is included in this application has consented to the fact that The Cabinet Office and other Government agencies may be supplied with that personal information and has been made aware of the purposes for which it has been collected and may be used.

Eligibility

* indicates a required field

Who can't apply

Funding will not be provided to:

- Individuals or groups of individuals, including sole traders.
- Unincorporated organisations.
- For profit commercial organisations and entities.
- Sub-contractors either for program management or for project delivery on behalf of non-eligible organisations.
- NSW Government or Australian Government agencies or their entities (including public trusts).
- Applicants requesting 100 percent project funding from Women NSW.
- Projects which already receive NSW or Commonwealth Government funding.
- Applicants with outstanding acquittal requirements with Women NSW
- Applicants with an obligation under the NSW National Redress Scheme who have not joined the Scheme (further information outlined in section 2.3 of the Program Guidelines).
- Projects supporting women to achieve self-employment and/or entrepreneurship are outside the scope of the Return to Work Pathways Program. Projects must be targeted to supporting women into paid employment.

Note: NSW Government schools, Area Health Services and public hospitals are ineligible to apply, however, an associated incorporated not-for-profit body, such as a Parents and Citizens Association or hospital auxiliary will be eligible to apply for funding.

2024-25 Return to Work Pathways Program eligible organisations

Form Preview

these four categories: *	my constituted Australian-based entity from one or
 Aboriginal and/or Torres Strai 	t Islander Community Controlled Organisations (ACCO). ganisation, including community organisation.
 NSW Local Councils and shire 	es (who must be listed on the Office of Local Government), of councils and consortia of councils.
Requirements for Aborigion Controlled Organisations	nal / Torres Strait Islander Community-
	eligible Aboriginal and / or Torres Strait Islander Community e strength and empowerment of Aboriginal and Torres people.
Please confirm you are: *	 □ Incorporated under relevant legislation □ 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 and no more than 5 choices may be selected. You must confirm all of the above.
Requirements for Not for	Profits
	ns must be registered and approved as a not-for-profit -date record in at least one of the following categories.
Which type of not-for- profit entity is your organisation: *	 □ Charities, trusts, and cooperatives that are registered with the Australian Charities and Not-for-profits Commission (ACNC) □ Organisations with Deductible Gift Recipient (DGR) status □ Organisations with Public Benevolent Institution status □ Associations (registered under the Associations Incorporation Act 2009 and with NSW Fair Trading). □ A Local Aboriginal Land Council under the Aboriginal Land Rights Act 1983 (NSW) and registered with the NSW Aboriginal Land Council □ Indigenous Corporations registered with the Office of the Registrar of Indigenous Corporations At least 1 choice must be selected. You must nominate at least one category.

Local Councils and Shires

O I confirm my organisation is listed on the Office of Local Government

Form Preview

Associations
Please list your incorporation number on the NSW Incorporated Associations Register
ORIC registration
What is your Office of the Registrar of Indigenous Corporations ICN number:
Social Enterprises
To be considered a social enterprise, applicants must satisfy each of the criteria below:
 be established with a social, cultural or environmental purpose consistent with a public and/or community benefit. trade commercially to fulfil their purpose.
 derive a substantial portion of their income from trading commercially. reinvest the majority of their surplus in the fulfilment of their purpose.
Applicants who progress to the second stage of this grant process (full application stage) will be required to provide evidence to demonstrate the social enterprise definition is met.
Evidence requirements are either Social Traders certification or People and Planet First global verification.
At EOI stage applicants are required to indicate which certification or verification they will use.
Please indicate which certification or verification process you will use: * O Social Traders certification O People and Planet First global verification
EOI eligibility confirmation
If your EOI is successful, you must be able to confirm the following in the full grant application stage:
I confirm: * ☐ Applicant will obtain appropriate public liability insurance (minimum of \$10 million) to run a Pathways grant project if successful.
 □ Application will provide a budget outlining proposed funding of eligible expenditure items including a minimum of 10 per cent funding from other sources (monetary or in-kind). □ The application will be made by a single organisation that will accept responsibility for the delivery of the event if the application is successful.
☐ Applicant is based within NSW, or applicant can demonstrate the project will be run in and for the benefit of women and/or girls in NSW and that the organisation meets all
regulatory, business requirements. ☐ Application does not already receive NSW or Commonwealth funding for this project At least 5 choices and no more than 5 choices may be selected.

Form Preview

Contact Details

* indicates a required field

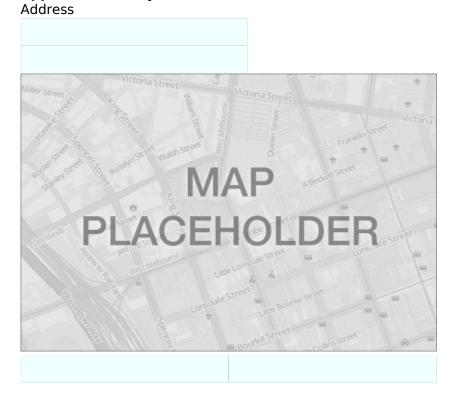
Please select ORGANISATION (not individual)

Applicant Details

Applicant * O Individual Organisation Name		○ Organisation	
Title	First Name	Last Name	

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



Applicant Postal Address

Address

Form Preview

Applicant Primary Phone Number *
Must be an Australian phone number. Country code not required, area code for landlines is required.
Applicant Email Address *
Must be an email address.
Must be an email address.
Applicant Website
Must be a URL.
Primary Contact Details
Primary Contact * Title First Name Last Name
This is the person we will correspond with about this grant.
Primary Contact Position *
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.

Organisation Details

* indicates a required field

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

Form Preview

○ Yes	○ No	
Applicant Organisation AB	N *	
	d to look up the following information.	Click Lookup above to
check that you have entered	•	-
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	More information	
Tax Concessions		
Main business location		
Must be an ABN.		
Applicant Organisation AC	N or AIN *	
Applicant organisation Ac	art of All	
Project Details		
* indicates a required field		
Title *		
Word count: Must be no more than 25 words. Provide a name for your initiative	e. Your title should be short but descriptive	۵.
_		
Brief description *		
Word count:		

Must be no more than 50 words.

Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

Form Preview

Anticipated start date *	
Anticipated end date *	
Primary location of your initiative Address	:
Miller Street Mictoria Street Mictoria Street Mictoria Street MAP PLACEHO Met Metourne Loredale Street Loredale Street	PROUNTSTREET ABechert Street Lonson e Street Reacurke Street Collans Street
Any, but at least one field is required. Primary location does not need to be a spedelivered online, please specify the area of	ecific address, and can be postcode, suburb, state, etc If of focus for delivery.
ERROR: Please update anticip	pated event start/end date
Additional Project Location/s	
Please complete this section if yo multiple locations.	ou are delivering the project in additional /
Additional location	Address

Form Preview

Specific address to include suburb, state and postcode

2024-25 Return to Work Pathways Program priority cohorts

The RTWPP supports women who face enduring and complex barriers to enter or re-enter the workforce. The 2024-25 RTWPP projects must target and support one of the following eight priority cohorts of women.

Which of these priority cohorts will your project target? *

- Aboriginal and Torres Strait Islander women
- Women with disability
- Carers
- O Young women (17-24 years)
- Older women (55 years and over)
- Women from culturally and linguistically diverse communities
- O Women living in regional, rural, and remote areas (particularly Far West NSW and North Western NSW)
- Women living in Western Sydney

Only one choice may be selected. Select the primary cohort you will be working with. Please note - RTWPP does not fund projects to deliver support to women under the age of 17 years.

Number of participants

What is the minimum number of participants that will be supported? *

Must be a number.

Include the minimum number of participants your project will provide services and support to.

Service delivery model

The RTWPP will fund a variety of tailored and bespoke models that respond to women from priority cohorts experiencing complex and persistent barriers to employment. Projects must deliver at least four of the following services and support components:

- Tailored wrap around supports
- Mentoring
- Training
- Work readiness
- · Pathways to employment
- · Engagement of employers
- Other supports

Please refer to the program guidelines for further information.

Detail your existing connections and work with women from the nominated priority cohort. *

Form Preview

Word count: Must be no more than 100 words. Write succinctly. Feel free to use dot points.	
Detail the service delivery model your project will use to nominated priority cohort to achieve employment. You the model: a) is specifically tailored to address participa to employment b) the types and amounts of supports the participants to achieve increased work readiness and en	must ants' nat w
Word count: Must be no more than 200 words. Write succinctly. Feel free to use dot points.	
Outline your organisation's capacity to deliver the proje experience in delivering employment support programs	
evidence of employment outcomes achieved. *	
Word count: Must be no more than 100 words. Write succinctly. Feel free to use dot points.	
Provide a clear rationale for your service delivery mode value for money, factoring in the minimum number of page 1.	
Word count: Must be no more than 100 words. Write succinctly. Feel free to use dot points.	
write succinctly. Leel free to use dot politis.	
Budget	
* indicates a required field	
Eligible and ineligible expenditure	

Items **eligible** for grant expenditure:

Form Preview

Grant funding can only be used for expenses directly related to the delivery of the project in NSW. Applicants must clearly set out proposed expenditure in the budget section of the EOI form.

Please do not include any costs related to the items listed below which are not eligible uses of funding.

Items **not eligible** for grant expenditure:

- 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 project).
- Operating costs of the organisation or recurrent expenses (e.g. insurance, leases, bills, general office consumables and disposables).
- Permanent wages, salaries and on-costs for ongoing staff.
- Organisational development costs for internal staff (e.g. staff training, conferences, workshops, planning days).
- Conferences you cannot use the fund to conferences and workshops, or to pay for an individual or group attend a conference. This does not include structured, time limited training sessions and workshops with practical and clear outcomes for project participants.
- Prizes, competition or awards (e.g. cash giveaways, lucky door prizes, raffle prizes).
- Interstate and/or overseas travel allowances or 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.
- Any project run solely for commercial purposes to the benefit of the delivery partner but not the program participants.
- Projects and activities coordinated by NSW Government Departments and Statutory Authorities.
- Research projects, including those 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.
- Acquittal, auditing or reporting costs.
- 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.

Project funding

TOTAL PROJECT COST = Women NSW funding + your (10% minimum) contribution (financial or in-kind).

TOTAL AMOUNT REQUESTED = How much you are requesting from Women NSW for your project (must be between \$100,000 - \$250,000).

Please add these amounts in the section below.

Form Preview

Total Project Cost *	\$		
	What is the total budgeted cost (dollars) of your project?		
Total Amount Requested	\$		
*	What is the total financial support you are requesting un grant?	der this	

Declaration and Authorisation

* indicates a required field

Declaration

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 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 form 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

Authorisation

l agree *	□ Yes		
Name of authorised	Title	First Name	Last Name
person *			

Form Preview

	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
Email *	Must be an email address.