Eligibility Criteria

* indicates a required field

How to apply

Help Guide for Applicants
Before completing this application form, please read the program guidelines provided at the link below:

- **Download: Youth Week WA Annual Grants Program 2026-27 Guidelines**

Please complete the grant application providing a level of detail which is commensurate with the value of your grant and the type of project or activity that the grant will fund.

Please ensure all **attachments are clearly and meaningfully labelled** to indicate their contents.

Once a grant application is submitted, no changes or modifications can be made. Please ensure all information is accurate and complete before submission.

You will not be able to submit an application after the closing time and date.

If you have any questions regarding the Guidelines, deadlines, or questions in this form, please contact the Grants Team:

Aaron Lee**Phone:** 0403 990 103**Email:** grants@communities.wa.gov.au

If you do contact us throughout the application process, please quote the application number below.

Application Number

This field is read only.

Grant Round Name

This field is read only.

Are you eligible?

Before proceeding, please confirm the following:

- you have read and understood the program guidelines.
- you are able to demonstrate alignment between your project and the aims of this program.
- your organisation is a not-for-profit organisation or local government authority.
- your organisation is incorporated, or is auspiced by an incorporated organisation/local government authority for the purposes of this application.
- your organisation is located in Australia and delivering services in Western Australia.
- your organisation does not have a 'Failed to Acquit' letter from the Department of Communities as a result of outstanding acquittals from previous funding or grants.

Youth Week WA Grants Program 2027 Each organisation may submit one application for a Category 1 or 2 Youth Week WA grant (up to $10,000, including $1,500 and $3,000) and one application for a Category 3 (Closing Event) grant. Separate application forms will need to be submitted if applying in both categories.

If your organisation is acting as an **auspicing organisation** on behalf of one or more unincorporated groups, you may still submit one application in your own right and also **auspice multiple applications** for unincorporated organisations.

Notes for Unincorporated Groups or AssociationsImportant: Unincorporated groups cannot receive grant funding directly.If the organisation undertaking the project is **unincorporated,** the grant must be applied for through an **auspice** that is either:

- a **not-for-profit incorporated organisation**, or
- a **local government authority**.

The **auspice organisation** will take on administrative, legal, and financial responsibility for the grant. This includes:

- accepting and adhering to all terms and conditions of the grant;
- assuming responsibility for financial management of the grant;
- ensuring the unincorporated group maintains financial records and meets reporting requirements; and
- receiving and administering the grant funds on behalf of the unincorporated group.

You will be required to upload a completed **Auspice Letter** using the template provided in the **Auspice Information** section of this application form.

I have read and understood the above statements and eligibility criteria. *
○ Yes, I confirm.

Applicant Contact Information

* indicates a required field

Privacy Notice

Information collected in this application will be used by the Department of Communities (the administering agency) to assess eligibility, manage the grants program, and for related reporting, evaluation, compliance, and audit purposes. Information may be shared with other Western Australian Government agencies, external assessors or contractors where required to administer the program, or where authorised or required by law. Information included in your application to address the assessment criteria, for example service models or project plans, will be treated as commercial-in-confidence.

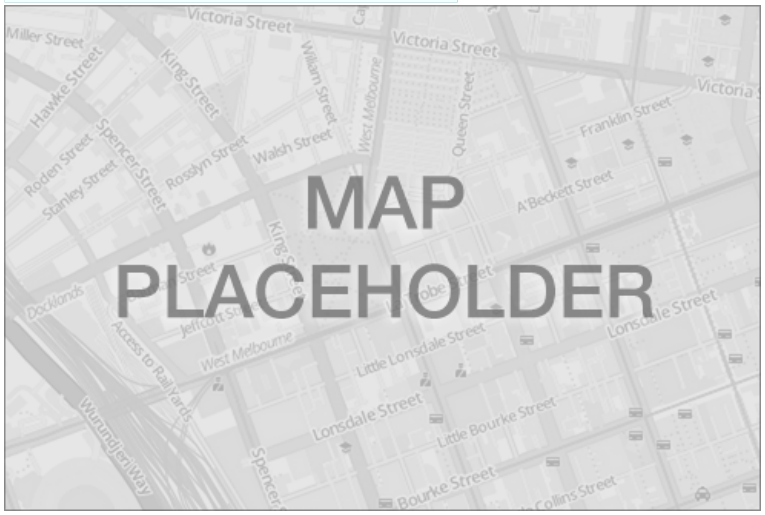
Information will be handled in accordance with applicable Western Australian privacy requirements, as outlined on the WA Government Privacy webpage, including obligations relating to secure storage, access and correction. If requested information is not provided, the application may not be able to be assessed.

Organisation Details

Applicant *
Organisation Name

You must provide the organisation's legal entity name as per your ABN or Certificate of Incorporation

Primary address *
Address



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Postal address (if different from above)
Address

Email *

Must be an email address.

Phone number *

Must be an Australian phone number.
Enter the phone number, including the area code for landlines (e.g., 08 1234 5678) or the mobile number (e.g., 0412 345 678).

Website

Must be a URL.

Primary Contact Details

Primary contact *

Title | First Name | Last Name

Position title *

(e.g., Manager, Director or Fundraising Coordinator.)

Email address *

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

Phone number *

Must be an Australian phone number.
Enter the phone number, including the area code for landlines (e.g., 08 1234 5678) or the mobile number (e.g., 0412 345 678).

Office number

Must be an Australian phone number.
Enter the phone number, including the area code for landlines (e.g., 08 1234 5678) or the mobile number (e.g., 0412 345 678).

Applicant Organisation Information

* indicates a required field

Select the entity type of your organisation

- ○ Aboriginal Corporation
- ○ Incorporated Organisation
- ○ Local Government Authority
- ○ Not-for-profit Company
- ○ Not-for-profit Trustee
- ○ Organisation established under an Act of Parliament
- ○ Unincorporated Group

Does your organisation have an ABN? *

○ Yes ○ No

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	

What is your incorporation number?

Incorporated Association or Australian Company Number

File Upload: Certificate of Incorporation
Attach a file:

Max 25mb per file uploaded

Auspice Information

* indicates a required field

Auspice Arrangement

Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation.

If your organisation is unincorporated and does not currently have an auspice organisation, you **must** arrange an eligible auspice before submitting your application.

In accordance with the Grant Guidelines, applications submitted by **unincorporated organisations without an eligible auspice organisation** will be considered **ineligible** and will not proceed to assessment.

Instructions:

1. Download the Auspice Arrangement Letter Template below.
2. The Letter must be completed and signed by an authorised representative of the auspice organisation.
3. Upload the signed Letter on the Auspice Information page of this application.

Download: Auspice Arrangement Letter Template

Is your organisation auspiced by another organisation for the purpose of this grant? *

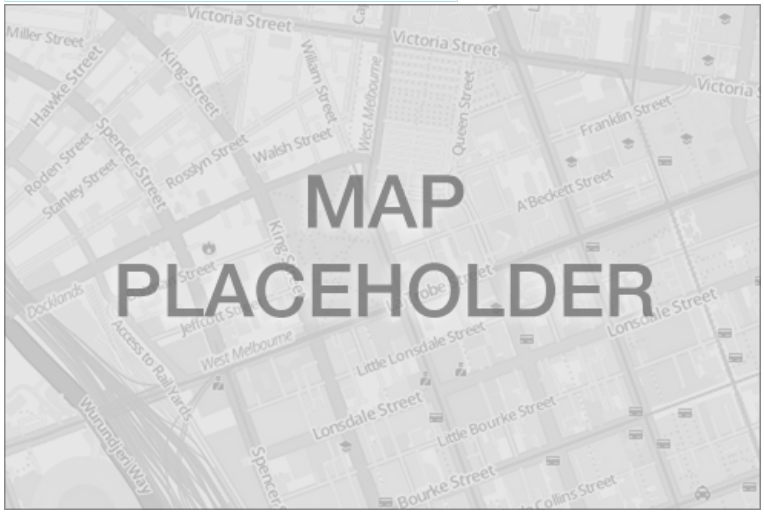
- ○ Yes
- ○ No

Auspice Organisation Details

Auspice organisation name *
Organisation Name

Please use the organisation's legal entity name from the ABN registration or Certificate of Incorporation.

Primary address *
Address



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Postal address (if different from above) *
Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Email address *

Must be an email address.

Phone number *

Must be an Australian phone number.
Enter the phone number, including the area code for landlines (e.g., 08 1234 5678) or the mobile number (e.g., 0412 345 678).

Website

Must be a URL.

Upload signed Auspice Arrangement Letter *
Attach a file:

(Upload the completed and signed Auspice Arrangement Letter. Unsigned letters or incomplete templates may result in the application being considered ineligible.)

Does the auspice organisation have an ABN? *
○ Yes ○ No

Auspice ABN

Auspice 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.

Auspice Contact Details

Auspice contact *
Title First Name Last Name

We may contact this person to verify that the auspice arrangement is valid and current.

Position title *

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

Email address *

Must be an email address

Phone number *

Must be an Australian phone number.
Enter the phone number, including the area code for landlines (e.g., 08 1234 5678) or the mobile number (e.g., 0412 345 678).

Office number

Must be an Australian phone number.
Enter the phone number, including the area code for landlines (e.g., 08 1234 5678) or the mobile number (e.g., 0412 345 678).

About Your Project

* indicates a required field

Project Overview

Project Title *

(Provide a name for your project/program/initiative.)

Select all options that best describe the types of events/activities you will hold: *

☐ Festival
☐ Workshop, seminar or talk
☐ Award ceremony
☐ Sporting or recreational event
☐ Forum
☐ Art, music, dance and other cultural event
☐ Other:

At least 1 choice must be selected.

Please provide a short summary of your proposed activity/event *

Word count:
Must be no more than 40 words.
[Be descriptive, but succinct. Include a brief summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what outcomes you expect from your activities. This description may be used for marketing and publicity purposes.]

Please fully describe your event or activity and how it will celebrate the contributions of young people. *

(Your response should include: why the event or activity is needed; how it will celebrate young people; the key activities that will be delivered; the intended outcomes for participants and the community; and how the proposal aligns with the grant program objectives and assessment criteria. Please provide a level of detail commensurate with the value, scope and complexity of your proposal.)

Geographic location(s) that will benefit from the event *

(Please select all locations that apply from the drop-down menu in the box.)

Project Timeline

Event preparation commencement date *

Must be a date and no earlier than 1/12/2026.
(Please select the date you will start planning and organising the project.)

Date project complete and all expenses have been paid *

Must be a date and no later than 31/5/2027.
(Please select the date you expect to have completed the project by and paid all expenses. All sucessful applicants will be expected to acquit their grant funding by 31 July 2027.)

Main Event Date *

Must be a date and between 9/4/2027 and 31/5/2027.
(Date your event will be held.)

If your event will be held over multiple days, enter the initial date above and provide additional detail below. Please also see section below with a table to capture multiple event dates and proposed locations.

Will your event be held during Youth Week WA (16 April to 23 April 2027)? *

○ Yes ○ No

Event Held Outside Youth Week WA

Important: All events are to be held from the **16th to 23rd April 2027.** In extenuating circumstances, we may support an event held outside of Youth Week WA.

As your event would not be held during Youth Week WA, please state the reason(s): *

(Include any cultural, seasonal, community, logistical, or venue-related factors that influenced the event timing.)

Proposed Event Date & Location

Please note: All events are to be held from **Friday 16 to Friday 23 April 2027** during Youth Week WA.

Exemptions may apply for events to be held outside Youth Week between 9 April to 30 April 2027 for exceptional circumstances, as assessed by Communities on an ad hoc basis.

In addition, regional applicants impacted by local conditions (e.g., harvest or bush fire season) may apply for exemption to host an event up to 31 May 2027.

Events not held between 16 to 23 April due to approved exceptional circumstances must be held by 30 April 2027, or 31 May 2027 for regional applicants affected by local conditions.

**Department of Communities will not fund expenses incurred before the grant term. All applicants will be advised of the outcome of their submission by the end of December 2026.*

Date	Event venue	Event address	Event website	Start time	End time
Must be a date and between 9/4/2027 and 31/5/2027.		Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia	Must be a URL.	(HH:MM am/ pm)	(HH:MM am/ pm)

Participation Overview - Priority Groups

How many participants do you expect to engage in your project, by priority group and level of involvement?

Hint: Provide estimated participant numbers for each category. Individuals may be counted in more than one group if relevant.

Expected participants involved in planning and delivery

Young people with disability, including mental health conditions

Must be a number.

Expected participants engaged in program activities

Young people with disability, including mental health conditions

Must be a number.

Young people from culturally and linguistically diverse backgrounds

Must be a number.

Young people from culturally and linguistically diverse backgrounds

Must be a number.

Young people who identify as LGBTQIA+

Must be a number.

Young people who identify as LGBTQIA+

Must be a number.

Young people at risk, for example those experiencing homelessness or unemployment

Must be a number.

Young people at risk, for example those experiencing homelessness or unemployment

Must be a number.

Aboriginal and Torres Strait Islander young people

Must be a number.

Aboriginal and Torres Strait Islander young people

Must be a number.

Young carers of a person with disability or mental health condition

Must be a number.

Young carers of a person with disability or mental health condition

Must be a number.

Other young people (not captured in the above categories)

Must be a number.

Other young people (not captured in the above categories)

Must be a number.

Participation Overview - Age Distribution

Expected participants involved in planning and delivery

Aged 12-14

Must be a number.

Aged 15-17

Must be a number.

Aged 18-25

Must be a number.

Aged 26+

Must be a number.

Expected participants engaged in program activities

Aged 12-14

Must be a number.

Aged 15-17

Must be a number.

Aged 18-25

Must be a number.

Aged 26+

Must be a number.

Youth Involvement

Describe how young people aged 10 to 25 years have been, and/or will be, actively involved in planning and delivering the event or activity. Include examples of their roles, responsibilities, and how their ideas, feedback or decisions have influenced the project.

How will young people (aged 10 to 25 years) contribute to the planning and delivery of the event or activity? *

Community Partnerships

What other groups, organisations or local government authorities are involved in planning and implementing the event or activity (if applicable)?**Please list ALL the organisations involved, including contact details and the contribution.**

(Note: applicants are encouraged to partner with other organisations within their local community to collaboratively host an event.)

Use the **"+/-" button** to add/remove rows.

Organisation Name	Contact Person	Phone Number	How is this organisation involved?
e.g. XYZ Council	e.g. John/Jane Smith	Must be an Australian phone number.	e.g. on planning committee, free venue
Organisation Name			
Organisation Name			
Organisation Name			

Project Budget

* indicates a required field

Funding Request

Select the funding category that best aligns with the scale and scope of your project. *

If you are applying for Category 1 or 2 funding plus Category 3 funding, a separate application form must be completed.

Total Grant Funding Requested (excl. GST) *

(Enter the total amount of grant funding being requested. This amount should align with the proposed budget provided later in the application.)

Budget

It is important to show how the grant would be expended and any **cash** or **in-kind contributions**, from your organisation or project partners that will support the project.

Please use the budget tables below to detail project income sources.

Ensure that all costs are clearly justified and aligned with the project's proposed activities and expected outcomes.

Do not include GST in the costings below.

Youth Week WA Grant Funding

Please outline your project expenses in the expenditure table below.

Use the **"+/-"** button to add/remove rows.

Budget Item	**Youth Week WA Grant Amount (excl. GST)**
Provide a clear description for what the funding is to be spent on (e.g. Catering, Venue hire, Marketing, Signage).	Proposed grant expenditure from the Youth Week WA Grant Program only. Must be a dollar amount.

In Kind/Other Cash or Grant Funding

If applicable, please outline other sources of In Kind, Grant or Cash funding that you will contribute to the event/activity in the budget table below, including details of other income or funding that you have applied for, whether it has been confirmed or not.

Budget Item	**Amount (excl. GST)**	**Is this funding confirmed?**	**Source of Other Funding**
Provide a clear description for what the funding is to be spent on (e.g. Catering, Venue hire, Marketing, Signage).	Enter the total amount expected to be received. Must be a dollar amount.		Specify the source of Other Cash or In-Kind support funding.

Budget Totals

Youth Week Grant Funding Total

This number/amount is calculated.

Other Funding Source Total

This number/amount is calculated.

Total Project Value

This number/amount is calculated.

Banking Details

* indicates a required field

This section is to be completed by the organisation managing the grant funds. If you are an unincorporated organisation applying through an auspice, the bank account details provided should be for the auspice.

Bank Account *
Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Bank Name *

Bank Suburb

Affiliated Body

If the requested grant amount, combined with any other grants or funding received from Communities comprises **more than 50%** of the applicant organisation's total annual income for the current financial year, the organisation is an **Affiliated Body** of Communities.

Acknowledgement of affiliated bodies is a requirement of Communities in accordance with the *Financial Management Act 2016* and prescribed by the Treasurer's instructions.

Is your organisation an affiliated body? *

○ Yes ○ No

Grant Conditions

Grants provided through the Youth Week WA Grants Program are subject to the following terms and conditions:

1. The grant is to be used solely for the specified purpose approved by Communities during the funding period.

2. Written approval must be sought from Communities for any request to vary the approved purpose of the grant or seek an extension to the funding period.

3. Any part of the grant that is not used in accordance with Condition 1 must be repaid to Communities unless prior written approval is obtained.

4. Should the activities for which the grant was approved cease or should the grant agreement be terminated due to a breach of any of these Conditions, then:

(a) the balance of the grant, unspent in accordance with the approved purpose of the grant, must be repaid to Communities within ten business days; and

(b) any property acquired with the grant must be transferred to another not-for-profit organisation with similar objectives and purposes to the recipient organisation, upon approval by Communities.

5. Providing a grant does not entitle a recipient organisation to be provided any further funding than that specified in the grant agreement.

6. Communities will not be held responsible for the success of the approved purpose for which the grant is provided or for any losses or additional costs incurred that are associated with the approved purpose.

7. Any documents or information relating to the grant, or the approved purpose must be provided to Communities within ten business days of the request.

8. All payment conditions and reporting requirements must be met, as specified by Communities.

9. The Auditor General for the State of Western Australia, or an authorised representative, must be granted access to, and be permitted to examine, records and information concerning this grant.

10. All Local, State and Commonwealth laws applicable to the approved purpose must be abided by and complied with at all times.

11. Any project that involves working with children must ensure that the recipient organisation and all employees and volunteers comply with the *Working with Children (Criminal Record Checking) Act 2004*. Please refer to the Working with Children Check website for further information workingwithchildren.wa.gov.au.

12. Communities is not liable for any accident or negligence resulting in any claim or damage arising from activities undertaken as part of the grant.

13. Recipient organisations are required to be appropriately incorporated and be responsible for ownership of the appropriate insurance policies. This includes, but is not limited to, Public Liability, Volunteer Insurance, Workers' Compensation, and Professional Indemnity.

14. An acknowledgement of funding assistance provided by Communities must be included in any advertising and on any material relating to the project by using the words 'Supported by the Department of Communities'.

15. Any individuals involved with the project must not be exposed to significant promotions for alcohol or unhealthy food and drinks during the term of the project.

16. Goods and Services Tax (GST)

(a) For the purposes of Condition 16:

i. "GST" means the goods and services tax applicable to any taxable supplies, as determined by the GST Act;

ii. "GST Act" means *A New Tax System (Goods and Services Tax) Act 1999 (Cth)* and includes all associated legislation and regulations; and

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 through this agreement is a taxable supply under the GST Act, the grant shall be inclusive of GST.

(c) If the parties agree that Communities will issue the recipient organisation with a recipient-created tax invoice (RCTI), then the parties hereby agree that:

i. Communities will issue a RCTI in respect of GST payable on the supply of the project and the recipient organisation will not issue a tax invoice in respect of that supply;

ii. The recipient organisation warrants that it is registered for the purposes of GST and Communities 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 of the agreement; and

iii. Communities will indemnify and keep indemnified the recipient organisation for GST and any related penalty that may arise from an understatement of the GST payable on the supply of the project for which Communities issues an RCTI under the grant agreement.

17. If any of the terms or conditions are breached by the recipient organisation, Communities may terminate the grant agreement at any time and without giving prior notice.

Special Conditions of Grant

1. If the Project involves working with children, the Organisation must ensure that all employees and volunteers comply with the *Working with Children (Criminal Record Checking) Act 2004*. Please refer to this website for further information, at: https://workingwithchildren.wa.gov.au or contact the Grantor by email, at screeningunit@communities.wa.gov.au.
2. If the Project involves Services that comprise or involve "child-related work" as defined in section 6 of the Working with Children (Criminal Record Checking) Act 2004 (WA), the Service Provider agrees to: i. implement the National Principles for Child Safe Organisations (https://childsafe.humanrights.gov.au/national-principles/downloadnational-principles); ii. provide training to ensure that all Associates are aware of and comply with the National Principles for Child Safe Organisations; and iii. provide evidence of compliance with the National Principles for Child Safe Organisations to the State Party as and when required.
3. Organisations will commit, under the Disability Services Act 1993 (WA) and in alignment with the Western Australian Disability Access and Inclusion Plan (DAIP) Framework, to ensuring equitable access and full inclusion of people with disability in the funded Project.

Declaration

* indicates a required field

Certification

This section must be completed by an appropriately **authorised person** on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

On behalf of the applicant organisation, I declare that:

- I am currently authorised to legally enter into contracts on behalf of the organisation, according to its constitution or as bound by law.
- All the information provided in this application, including any attachments, is true and correct.
- The taxation and banking details entered in this application are true and correct.
- The organisation is financially viable and able to meet all accountability requirements.

- I give permission to the Department of Communities, when applicable, to contact any persons or organisation in the processing of this application and I understand that information may be provided to other agencies, where appropriate.
- I acknowledge that this application is for consideration purposes only and does not guarantee funding approval.
- If a grant is awarded:
    - **I am aware the Grant Conditions (Page 8) and Special Conditions of Grant (Page 9) outlined in this application form will apply to ensure a project is appropriately completed and accountability requirements are met.**
    - I agree to ensure that appropriate insurances are in place (including but not limited to worker's compensation, volunteers, professional indemnity, public liability, motor vehicle, etc.).
    - I agree to undertake the project as stated and provide the required qualitative and financial reports to demonstrate that the grant is to be expended in accordance with the agreement.
    - I understand that this is a competitive grant application process and that, by submitting this application, my organisation commits to delivering the proposed activities/events as outlined, on the dates specified in the application if successful.
    - I am aware that applications will be assessed and prioritised for funding by an independent evaluation panel based on the details provided. To ensure fairness and transparency, I understand that Communities will have limited discretion to approve changes to the proposal or event dates once applications have been evaluated and grants awarded.

I acknowledge and accept the terms of this declaration stated above. *

○ Yes, I confirm.

(Please read the above declaration carefully before proceeding.)

I authorise the Department of Communities to obtain any additional information necessary to assess and process this application. *

○ Yes, I consent.

(This confirmation is required to proceed with your application.)

I confirm that I am authorised to make this certification on behalf of the entity listed as the Applicant Organisation. *

○ Yes, I confirm.

(This confirmation is required to proceed with your application.)

Legally Authorised Officer *

Title | First Name | Last Name

Position Title *

(Must be a senior staff member, trustee or appropriately authorised volunteer)

Email *

Must be an email address.

Phone Number *

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

Additional Document Upload

- Ensure all documents are in PDF, DOC, or DOCX format.
- Ensure all documents are clear and legible.
- Double-check the file format and size before uploading.

If applicable, please upload a Project Plan and/or relevant documentation.
Attach a file:

A maximum of 5 files may be attached.

If applicable, please upload a Written Support document (e.g., letter of support from the relevant local government).
Attach a file:

Feedback

* indicates a required field

Feedback on the Application Process

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.

Please indicate how you found the online application process. *

○ Very easy ○ Easy ○ Neutral ○ Difficult ○ Very difficult

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

Must be a whole number (no decimal place).
Estimate in minutes i.e. 1 hour = 60

Please share any feedback, including suggestions for improvements or additions to the application form or process.

You Are Now Ready to Submit

When your application has been successfully submitted, a **confirmation email** will be sent to your registered email address with a copy of your submitted application attached.

If you do **not** receive this email, it may indicate that your application was **not** submitted.Please also check your spam or junk folder in case the confirmation email was filtered.If you are still unsure, we recommend logging into your SmartyGrants account to check the status of your application.