



AGT Small Grants Program Application Form

Individual/Group Information

| | | | |
|----------------------|--|-----------|--|
| Name: | | | |
| Group Name: | | | |
| ABN (if applicable): | | | |
| Postal Address: | | Town: | |
| State: | | Postcode: | |
| Email: | | | |
| Phone 1: | | Phone 2: | |
| Website: | | | |

Project/Activity Information:

| | |
|--|--|
| Project/Activity Title: | |
| Brief description of Project/Activity: | |
| Timeframe of Project/Activity: | |
| Total cost of Project/Activity: | |
| Grant Amount Requested: | |
| Are you receiving funding for this Project/Activity elsewhere. Please provide details. | |

1. How many people will benefit from your Project/Activity?
2. If known, what is the age of beneficiaries of the Project/Activity?
3. What region will primarily benefit from your Project/Activity?
4. How are you or your group involved in the grains industry?
5. How does your project relate to improved crop variety adoption and/or plant breeding research?



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6. How do you plan on acknowledging AGT's support of your Project/Activity?
7. Do you agree to provide a 500 word report with visual collateral to AGT on conclusion of your Project/Activity?

YES/NO

Ensure you have attached supporting documentation with the application, including if relevant:

- ☐ Certificate of ABN or printout from www.abr.business.gov.au
- ☐ Simple budget with quotes or evidence of financial expenses to be incurred
- ☐ Other documentation to support need for project/activity to occur (i.e meeting minutes, letter of offer from institution)

Please complete the below certification:

- ✓ I/we acknowledge and understand that all applications become the property of AGT
- ✓ I/we agree to inform AGT if there are any changes to the information provided in this application
- ✓ I/we agree to that the AGT selection panel decision is final
- ✓ I/we acknowledge that the decision to approve or not approve a grant application is solely at AGT's discretion
- ✓ I/we agree if successful to expend any AGT funding within 12 months
- ✓ I/we agree if successful to provide a 500 word written report and visual collateral no later than 1 month after the completion of the project/activity
- ✓ I/we agree for AGT to publish stories of grants funded

Name: Signed:

Group Name (if relevant):..... Position:

Dated:

Please submit your application via email to Rebecca Freeman, AGT National Communications Officer at rebecca.freeman@agtbreeding.com.au.

AGT will not be responsible for any project costs incurred before AGT officially informs the applicant, in writing, of the outcome of this application.