**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?

[Insert answer]

1. If known, what is the age of beneficiaries of the Project/Activity?

[Insert answer]

1. What region will primarily benefit from your Project/Activity?

[Insert answer]

1. How are you or your group involved in the grains industry?

[Insert answer]

1. How does your project relate to improved crop variety adoption and/or plant breeding research?

[Insert answer]

1. How do you plan on acknowledging AGT’s support of your Project/Activity?

[Insert answer]

1. 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](http://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.