

Mobile Fund Round 1 application form

Form Preview

Important information

The Start Strong Capital Works Grant Program aims to improve access to preschool by creating additional community preschool places in areas of need and demand across the state.

The Mobile Fund supports mobile services to replace existing vehicles to ensure continuity of service delivery. The Mobile Fund is separate from Department of Education operational funding for mobile preschools.

Before you begin, please take the time to review the following guides, which provide examples of the types of information and documents you can include to support your application:

- [Mobile Fund Guidelines](#)
- [Frequently Asked Questions \(FAQs\)](#)
- [Mobile Fund Application Guide](#)

Remember, if you start your application and realise that you do not have all the required evidence or documentation, you can save your application and return to it at a later date in the SmartyGrants portal.

If you have any application questions, please email capital.works@det.nsw.edu.au or call 1300 755 426 and ask for the Capital Works funding team.

Applicant details

* indicates a required field

Applicant details

1. Name of the organisation applying for this grant *

Organisation Name

2. Does the organisation applying for this grant hold, or intend to hold, a valid provider approval ID to operate a NSW early childhood service? *

- Yes, I am an Approved Provider
 No - you are not eligible for this grant

Provider Approval must be obtained before the grant can be confirmed.

What is your provider approval ID? *

Eg. PR-00000000

What is your mobile service name? *

Mobile Fund Round 1 application form

Form Preview

What is your mobile service approval ID? *

Eg. SE-00000000

3. Name of primary contact person for this grant *

First Name

Last Name

4. Position or title of primary contact *

5. Email address of primary contact

Must be an email address.

6. Mobile phone number of primary contact *

Must be an Australian phone number.

Correct formatting: 0411234567

7. Alternate phone number *

Must be an Australian phone number.

If landline, include area code.

8. Registered address of the organisation applying for this grant *

Address

Address line 1, Suburb, State, and Postcode are required. Country must be Australia. You must be registered or incorporated in NSW.

9. Australian Business Number (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

Mobile Fund Round 1 application form

Form Preview

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

10. Select what type of not-for-profit organisation you are: *

11. Select proof of your not-for-profit status: *

- Currently registered on the Australian Charities and Not-for-profits Commission (ACNC) charity register
- State incorporated association
- Local government
- Other proof

Enter your corporation number *

Eg. INC-0000000

Attach other proof of not-for-profit status *

Attach a file:

A minimum of 1 file must be attached.

For example, constitutional documents and/or articles of association that demonstrate the not-for-profit character of the organisation.

Eligibility details

* indicates a required field

12. Do you confirm that the new motor vehicle will be purchased to replace an existing vehicle for the purpose of maintaining service delivery? *

- Yes
- No - you are not eligible for this grant

13. Do you confirm that you are not applying for a grant that has already received full financial support from other sources? *

- Yes
- No - you are not eligible for this grant

14. Do you confirm that the proposed vehicle has not been purchased at the time of submitting this application? *

Mobile Fund Round 1 application form

Form Preview

- Yes
- No - you are not eligible for this grant

15. Do you confirm that the motor vehicle referred to in this application will be used primarily to deliver preschool education at approved mobile preschool venues? *

- Yes
- No - you are not eligible for this grant

16. Do you confirm that the motor vehicle referred to in this application will be fit for purpose and capable of transporting equipment to mobile venues and operating safely in variable weather conditions? *

- Yes
- No - you are not eligible for this grant

17. Do you confirm that the motor vehicle referred to in this application will be registered in NSW? *

- Yes
- No - you are not eligible for this grant

18. Do you confirm that you are currently funded by the NSW Department of Education as a mobile preschool? *

- Yes
- No - you are not eligible for this grant

Capability and capacity for delivery

* indicates a required field

19. Do you confirm that, if successful, the vehicle will be purchased and the funds acquitted within 6 months of the funding agreement being executed? *

- Yes
- No - you are not eligible to apply in this funding round

20. Select the statements below to confirm you understand and agree to them: *

- I confirm that the project has been discussed with all affected stakeholders and partners and that they are supportive of the vehicle purchase
- I confirm I will operate a mobile preschool service for at least a 4 year period after the vehicle is purchased

Maintenance of preschool education services

* indicates a required field

21. Describe how the vehicle will support continuity of service delivery *

Mobile Fund Round 1 application form

Form Preview

Word count:

Must be no more than 200 words.

22. Describe why the current vehicle is no longer fit for purpose *

Word count:

Must be no more than 200 words.

Accessibility and inclusion

* indicates a required field

23. Explain how the new vehicle will be used to provide and/or improve the provision of a culturally safe, accessible and inclusive educational setting for equity children (Aboriginal and/or Torres Strait Islander children, children with disability and additional needs, and children from low income settings) *

Word count:

Must be no more than 300 words.

Budget details

* indicates a required field

24. Attach at least two (2) separate motor vehicle quotes obtained in the past 6 months to substantiate your proposed budget below *

Attach a file:

25. Complete the tables below with the sources of funding and expenses for your vehicle *

Sources of funding

Mobile Fund Round 1 application form

Form Preview

- Provide a list of your project income sources using this table to write: the project income source name, type, amount and if the income source was confirmed at the time of submitting this application.
- All amounts must be excluding GST.

Source of funding	Type	\$ Amount (ex GST)	Is your source confirmed?
First two rows are compulsory, you can edit all other rows	List the source type below and any requested details	All amounts excluding GST	At the time of application submission
NSW Department of Education	Start Strong Capital Works mobile fund grant request	\$0.00	
Provider contribution	Preschool funds (must be at least 5% of the total cost of the vehicle excluding GST)	\$0.00	
In-kind services	<Write what services you are receiving & from whom here.> If this funding source does not apply to you: the amount should stay as \$0, and choose "No" for source confirmed column.	\$0.00	
Other (eg. Provider contribution loans, another grant program, large scale donations)	<If you have a loan, write the name of your lending entity here.> <If you have another grant program or large-scale donation, specify the details here.> If this funding source does not apply to you: the amount should stay as \$0, and choose "No" for source confirmed column.	\$0.00	

Vehicle expenses

- Provide an itemised list of your vehicle expenses and the sources you will use from your Sources of funding table above to fund each item.
- The first row is compulsory, all other rows can be added and deleted as applicable.
- All amounts must be excluding GST.

Vehicle expenses	\$ Amount (ex GST)	Source of funding
Vehicle cost (quote)	\$0.00	NSW Department of Education
Vehicle fit-out/modifications and labour	\$0.00	
Vehicle registration/admin	\$0.00	
Vehicle insurance	\$0.00	
Vehicle delivery	\$0.00	

Budget Totals

Mobile Fund Round 1 application form

Form Preview

The total sources of funding amount (your requested grant amount plus all other sources of funding) must be equal to the total vehicle expenses (all costs itemised in the vehicle expenses table).

Total sources of funding ex GST:

\$

This number/amount is calculated.

Total vehicle expenses ex GST:

\$

This number/amount is calculated.

Applicant declaration

* indicates a required field

26. An authorised representative for your organisation must read and sign the declaration below. Please note that providing false or misleading information may result in the withdrawal of funding.

I, the undersigned, declare that:

- The Applicant will be the Approved Provider of the service which is the subject of this application.
- The information in this application, including all documents attached to or forming part of this application, is to the best of my knowledge, true and correct.
- Where I am giving this undertaking and making this declaration as the applicant's delegate, I am duly authorised by the applicant to do so.
- I understand that submitting this application does not constitute a promise for funding.
- I understand that to remain eligible for this grant the proposed vehicle should not be purchased until I have received the outcome of my application.
- I confirm that, if successful, the vehicle will be purchased and the funds acquitted within 6 months of the funding agreement being executed.
- I confirm I have read and agree to the [Terms and Conditions](#) for this grant.

Name of authorised representative *

Position of authorised representative *

Email address of authorised representative *

Must be an email address.

Phone number of authorised representative *

Must be an Australian phone number.

Mobile Fund Round 1 application form

Form Preview

Date this declaration was acknowledged by the authorised representative *