

## JFM Fund Grant Application: For individuals

Please read our grant guidelines before completing this form or contact us at [grants@juliafarr.org.au](mailto:grants@juliafarr.org.au).

### 1. About you

Name	
Email	
Phone number	
Home address	
Please select your preferred contact method	<input type="checkbox"/> Email <input type="checkbox"/> Text <input type="checkbox"/> Phone
<b>Eligibility:</b> Our grants are only available to people with disability. Please provide brief information on your disability.	

## 2. About your project

### 2.1. Project name

Please give a brief name for your project. *(Maximum 10 words)*

### 2.2. Project description

**Activity:** What will your project do? *(Maximum 500 words)*

Please describe the planned work of your project and your project outputs or deliverables (what you expect to produce).

[Empty rectangular box for application content]

**Location:** Where will your project be delivered? *(Maximum 100 words)*  
Please describe the geographical area where your project will take place.

**2.3. The need for your project and the difference it will make.**

- How have you identified the need for your project?
- What difference will your project make for people with disability?

*(Maximum 500 words)*

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## 2.4. Innovation in inclusion

Please describe how your project takes an innovative approach to disability inclusion. You should explain how your project is doing one of the following:

- Doing something completely new, that no one has done before.
- Scaling up an innovation that you have already tested or piloted.
- Customising or adapting a proven model to a new context.

*(Maximum 250 words)*

## 2.5. Your project so far

Please provide a summary of what you've done so far to develop this idea.

*(Maximum 250 words)*

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## 2.6. Your experience

Please provide brief details of your experience to show that you can successfully deliver this project. You can include information on previous work, your skills and any connections with people or organisations who will help you to deliver the project.

*(Maximum 250 words)*

### 3. Project budget

Please include project costs, excluding GST.

We have provided blank lines for you to add your own budget headings. Please add extra lines to the budget if necessary. Alternatively, you can submit your own budget spreadsheet.

Budget headings	FY24/25	FY25/26	FY26/27	Total
<b>Total</b>				
Amount of grant requested				

If your grant request is less than the total project cost, please explain how the remaining costs will be funded.

Please add any additional comments on your budget.

## 4. Your referees

Please provide the contact details for two referees. These should be people who are familiar with your planned work and are not related to you or members of your household. We will contact these referees to confirm information about your planned project.

### Referee 1

Name	
Relationship to applicant	
Contact email	
Contact phone number	

### Referee 2

Name	
Relationship to applicant	
Contact email	
Contact phone number	

<p>Where did you hear about this grant opportunity? <i>(This will not affect the assessment of your application, but it helps us to understand how best to promote our grant programs)</i></p>	
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Signed	
Name	
Date	Click or tap to enter a date.

Completed proposals and any supporting information should be sent to:  
[grants@juliafarr.org.au](mailto:grants@juliafarr.org.au)