

MHCC ACT Training and Development Grant Application Form

How to submit an application

1. Read the 'Important Information' page preceding the application form. It explains who and what is eligible for a grant; the terms and conditions for accepting a grant; and how it is paid.
2. Complete the application form. A separate form is required for each applicant (unless an organisation is applying for its own group training, in which one form for the entire event is adequate). Only completed forms will be accepted.
3. Email the completed form to **admin@mhccact.org.au** with the subject line Training Grant Application. Applicants defined as an 'organisational applicant' must also copy their manager into this same email.
4. If you have any questions or need to make alternative arrangements, please contact us on 02 6249 7756 or admin@mhccact.org.au.

Important dates: deadlines and notifications

1. Successful applicants will be notified in the first week of each month.
2. Applications must be received by MHCC ACT at least 5 working days before the end of the previous month to be considered for the following month's announcements.
3. Applications will only be considered for events that take place within six months of the date of application.

Peak body for community mental health services in the ACT

IMPORTANT INFORMATION:

What are these grants for?

- The ongoing development of the professional standards and quality of the ACT's community managed mental health services and workforce.
- Supporting consumer and carer involvement in the planning, implementation and evaluation of these services, and of the activities of MHCC ACT.

What activities do these grants support?

- People attending external training and development events in Australia or internationally
- Organisations providing their own training and development, especially if the event is open to people from other member organisations, consumers and carers.
- Joint initiatives with MHCC ACT offering training and development to anyone with an interest in community managed mental health services in the ACT.

How are grants assessed?

Guiding principles for assessing grant applications are as follows:

- Value and relevance of the training to the member and the sector
- Contribution to a diversity of learnings in the sector
- How effectively the learnings can be shared in the sector
- The member has not already received a large cumulative amount of grants relative to other members; and has not exceeded the annual limits set for these grants
- For members who previously received a grant: they adhered to the terms and conditions

Who is eligible for these grants?

Grants are only available to MHCC ACT members. You can sign up as a member on our website at: <http://www.mhccact.org.au/become-a-member-of-mhcc-act>. Membership is free for individual consumers and carers.

There are two categories available:

- Organisational grant – for staff, volunteers or service users of member organisations, paying up to a maximum of 75% of the combined cost of participation, and up to a maximum of:
 - \$750 per applicant per event
 - \$2250 per financial year per organisation
- Individual grant – for individual consumer or carer members interested in contributing to the sector, paying up to 100% of the combined cost of participation, and up to a maximum of:
 - \$1000 per financial year per individual.

Peak body for community mental health services in the ACT

Room 1.06, Level 1, The Griffin Centre
20 Genge Street, Canberra City ACT 2601
Tel (02) 6249 7756 Fax (02) 6249 7801

Email admin@mhccact.org.au Website www.mhccact.org.au

Grant terms and conditions:

Grants are only payable for the following costs (and in accordance with the details submitted in the application form):

- Fees for the training or development activity (eg. registration fees; costs of hiring a trainer)
- When the event is held outside of the ACT, transport to and from the city where the event is being held (eg. return airfare/bus/train; private car use in accordance with ATO guidelines) and accommodation costs for the duration of the event only.
 - In the case of individual consumer and carer members, the costs of transport within the city can also be claimed.
- Any reasonable special needs costs

Within two weeks of the event, grant recipients must:

- Supply MHCC ACT with receipts/invoices showing the expenditure for which they have been granted the grant (these can be copies);
- Provide MHCC ACT with a completed feedback form about the activity (available on our website)
- Organisations may be asked to acknowledge in their Annual Report the funding assistance provided by MHCC ACT in cases where significant financial assistance has been provided for a one-off training event or over the course of a year. This will be negotiated at the time the grant is granted.

How is the grant paid?

- As a reimbursement after the activity has occurred, within four weeks of submitting receipts/invoices and the standard feedback form to MHCC ACT
 - If paying for your expenses upfront and then being reimbursed later will cause you difficulties, please contact us to discuss another arrangement.

For further information

- check out our website at www.mhccact.org.au
- email us at admin@mhccact.org.au
- call the office on 02 6249 7756

Application Form

A. I am applying for an:

Individual grant (consumers and carers)

ie. you are an individual consumer or carer member of MHCC ACT and are applying on your own behalf, and not as an employee or volunteer of an organisation.

Organisational grant (staff and volunteers)

ie. you are applying as staff/service user/volunteer of a MHCC ACT member organisation. You must answer all questions.

B. Applicant's name:

Position:

Best phone contact details:

Email address:

Organisational details (skip if applying for an individual grant)

C. Name of organisation applicant works for:

D. How long have you worked for this organisation:

How long have you worked in the community/mental health sector:

E. Name of applicant's manager:

Manager's best phone contact details:

Manager's email address:

F. Does your manager agree to the terms and conditions of this grant? Yes No

Is your manager informed about the event you want to participate in? Yes No

Has your manager approved this application and your participation in the event? Yes No

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Details of the training/development event

G. Event title:

H. Event date:

I. Event address:

J. Registration or participation fee for this event: \$

K. For events outside of the ACT, or if an organisation is bringing in a trainer from outside the ACT:

Cost of accommodation for duration of event only:

Cost of return transport (select one only):

- Return air/train/bus fare: \$
- Car use: (number of kms: @ ATO rate \$0.66 per km = total of \$)

Note: ATO rate was correct at April 2016. These rates change from time to time. To check if rate has changed, enter the words "car mileage ATO rates", and the current year, into your search engine.

L. Cost of meeting any special needs expenses: \$

Description of item or service required to meet special needs:

M. TOTAL COST (ie total of J, K, L, above): \$

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N. Why is this training or development activity important and useful?

Tell us why this activity is important to you, your organisation and/or the ACT community managed mental health sector, consumers and/or carers. Length guide: approx. 100 words, but no more than 500 words.

O. Apart from completing the standard MHCC ACT feedback form about this activity, are there any other ways your learnings will/can be shared with others?

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P. DECLARATION:

I have read and understand the information provided, and to the best of my knowledge I have complied with both the intent and the requirements of the scheme. I understand that MHCC ACT's decisions regarding funding is final, and if this application is approved, the grant will be provided as a reimbursement after the activity has been completed (unless otherwise negotiated and confirmed in writing), and after supplying MHCC ACT with copies of the receipts/invoices for the expenses incurred and a completed standard feedback form.

Applicants Name:

Date:

Q. Any comments or suggestions?