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| **APPLICANT INFORMATION** | | | | |
|  | **Applicant (individual)\***  **Name**  **Postal address**  **Tel/Mob number**  **Email address** | | **\*Applicant must be 18 years of age or over and not hold convictions for any fraud offences or be an undischarged bankrupt**  **\*ABN – if you have a new ABN number for your new business venture please include this number at item 7 below**  **\* Due to the requirements of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* QYAC board members, their spouse, children and parents are not eligible to apply for funds under the IBDF .**  **\* QYAC staff are not eligible to apply for funds under the IBDF.** | |
|  | **Applicant\* (business)**  **Company business name**  **ABN\* and ACN/ICN number**  **Registered business address**  **Tel/Mob number**  **Email address** | | **\*Applicant must be 18 years of age or over and not hold convictions for any fraud offences or be an undischarged bankrupt**  **\*ABN – if you have a new ABN number for your new business venture please include this number at item 7 below** | |
|  | **Contact person/s**  **Tel/Mob number**  **Email address** | | **(If more than one applicant, please provide contact person details here)** | |
| **ELIGIBILITY CRITERIA** | | | | |
|  | **Are you applying for funds to support a new business venture?** | | **YES - Please provide/attach documents which prove that your funding proposal is for a new venture**  **(If your answer is NO, your application is not eligible for funding)** | |
|  | **To be eligible for funding your business must be one of the following:**   1. **Majority\* owned by  Quandamooka People\*\*; or** 2. **Controlled by a majority of Quandamooka People;** 3. **A joint venture controlled by a majority\* of Quandamooka People or Quandamooka business entity?** | | **Please provide/attach information that proves your business is owned/controlled by Quandamooka People for eg – QYAC membership, letter of confirmation of Aboriginality and Torres Strait Islander descent, company extract etc**  **\* More than 50%**  **\*\* Quandamooka People are the descendants of the apical ancestors listed in Attachment 1 to this application**  **(If your business or joint venture is not owned/controlled by a majority of Quandamooka People your application is not eligible for funding)** | |
| **INFORMATION REGARDING YOUR *PROPOSED* BUSINESS and FUNDING PROPOSAL** | | | | |
|  | 1. **Proposed business name:-** 2. **Trading name:-** 3. **Business type:-** 4. **Location:-** | |  | |
|  | **Do you have a new ABN number for your new business venture?** | | **YES – (insert number)** | |
|  | **If you do not have a new ABN number for your new business venture, do you intend to apply for one?** | | **YES – (insert details)**  **NO – (explain why you believe it is not needed)** | |
|  | **In 50 words or less, describe your new business venture (including business aims and objectives)** | |  | |
|  | **How much funding are you applying for?** | | **Please indicate amount you are applying for under the IBDF grant.**  **Please indicate the Total Project Cost including the IBDF grant mount.**  **Please indicate if you have secured other sources of funding for the Total Project Cost.** | |
|  | **Can you repay any funding granted to you under this application? If so, please provide details of a repayment plan.** | | **\*If you have more information, please attach it to this application**  ***\*\*Any funding amounts repaid will be diverted back to the IBDF to expand funding available to support Quandamooka Businesses into the future*** | |
| **ASSESSMENT CRITERIA – BUSINESS VIABILITY** | | | | |
|  | **Only viable business proposals will be eligible for funding.**  **Please provide a copy of your business plan. This should include the following;**   * **Products/Services** * **Business environment/competitors** * **Budget** * **Financial plan** * **Operational plan** * **Capital expenditure** * **Marketing strategy**   **for the first two years of the new venture.** | | **\*If you have a business plan and budget, please attach a copy to your application** | |
|  | **Have you previously applied for funding (including loans) for your proposed new venture or a similar venture?** | | **Yes – (please provide details)** | |
| **ASSESSMENT CRITERIA – COMMUNITY DEVELOPMENT** | | | | |
|  | **Please outline how your new business venture improves the availability and quality of goods and services to the Island community** | |  | |
|  | **Please outline how your new business venture provides employment, career and skills development to the Island community** | |  | |
|  | **Please outline how your new business venture provides assistance to vulnerable groups in the community such as women, the elderly and youth** | |  | |
|  | **Please outline how your new business venture contributes to the well-being of the Island community** | |  | |
|  | **Please outline how your new business venture advances the priorities of the Quandamooka People**  **(See *for example only* how the QYAC Strategic and Community Plan identifies the priorities of QYAC members by visiting:** [**http://www.qyac.net.au/publications/our-direction-2014-2016/**](http://www.qyac.net.au/publications/our-direction-2014-2016/) **)** | | \*AS | |
|  | **Please outline how your new business venture advances eco-cultural sustainability for the island of Minjerribah** | |  | |
| **APPLICANT CREDENTIALS** | | | | |
|  | **Relevant training/qualifications of Applicant/s and any key employees** | | (please attach to the application) | |
|  | **Referee contact details** | | 1.  2.  (provide contact details for at least 2 referees who can support your funding application) | |
| **SIGNATURE & DECLARATIONS** | | | | |
| *I declare that*   * *I am over 18 years of age, that I have not been convicted of any fraud or dishonesty offences within the last 10 years;* * *I am not an undischarged bankrupt or insolvent;* * *The information provided in this application and attachments is, to the best of my knowledge, true, accurate and complete;* * *I am authorised to make this application and to sign and submit this application on behalf of the Applicant.*   *I agree*   * *to provide further information or documentation to expand upon or verify the information supplied in this form if requested to do so by QYAC or the Advisory and Assessment Committee;* * *that the Advisory and Assessment Committee has absolute discretion to accept or reject my application for funding in whole or in part;* * *that if my funding application is successful, I am willing to enter into a funding agreement with QYAC which may include reporting requirements regarding the expenditure of funds;*   *I also agree that*   * *if my application is successful, upon request, I will not unreasonably refuse publication by QYAC or DSDMIP of my full name, business trading name and brief description of business activities for the purpose of promoting the IBDF through the print and electronic media, Queensland Government announcements and various electronic media platforms and social platforms administered by QYAC and DSDMIP.*   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **(Applicant signature)**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **(Applicant signature)**  **Date:**  **DO YOU APPROVE THE PROVISION OF A COPY OF THIS APPLICATION AND RELEVANT ATTACHMENTS TO DATSIP? YES / NO (PLEASE CIRCLE)** | | | | |
|  | | **PRIVACY and INFORMATION** | |
|  | | Application information including personal information is collected only for the purpose of assessing applications for funding under the IBDF and any subsequent funding agreements. | |
|  | | Application information including any commercial in confidence material will only be handled by QYAC corporate staff and IBDF Advisory and Assessment Committee representatives and staff. | |
|  | | Personal information will be managed by QYAC in compliance with the *Information Privacy Act 2009* (Qld) and any other relevant legislation. | |
|  | | QYAC and the Queensland Government may publish general information regarding successful applications. | |

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|  | **ATTACHMENT 1** |
|  | **QUANDAMOOKA PEOPLE – APICAL ANCESTORS\*** |
|  | a. Nellie/Lilly Kidgeree  b. Mary Indoole Compignie  c. Elizabeth Ruska  d. Charlie Moreton (Dandruba)  e. Sidney Rollands (Kingal/Winyeeaba)  f. Lillian Lyons (Dungoo)  g. King Billy Toompani  h. Juno (Gonzales)  i. Liza Jungerboi (mother of Rose Martin nee Bain)  j. Tommy Nuggin (Gendarieba)  k. Tilly (mother of Tommy Dalton, Richard Dalton and Henry Lea)  l. Kindarra |
|  | \*The apical ancestors of the Quandamooka People are listed above in accordance with the Federal Court determination *Delaney on behalf of the Quandamooka People v State of Queensland* [2011] FCA 741 at Schedule 1 |