



## ATDC SECTOR DEVELOPMENT SMALL GRANTS FUND

The ATDC Sector Development Small Grants Fund provides an opportunity for ATDC Members (Full Organisational Members) to access financial support for their staff to participate in individual professional development courses, training or qualifications which will enhance specific alcohol and other drugs skills and knowledge.

<b>2020 GRANT ROUND OPENS:</b>	<b>1 NOVEMBER 2019</b>
<b>2020 GRANT ROUND CLOSES:</b>	<b>30 MARCH 2020</b>

To ensure ongoing access and equity of grant allocations, the following eligibility criteria and guidelines have been established. Please ensure you read the information below before submitting an application.

### ELIGIBILITY:

You are eligible to apply for an ATDC Sector Development Small Grant if:

- Your organisation is a current 'Full Organisational Member' of the ATDC (please check with us if you are unsure about your organisation's status)
- The course/training/qualification you have selected to do will directly improve client and/or service delivery outcomes and directly relates to the specific AOD work that you do
- Your Manager has endorsed your attendance at the course/training/qualification and has approved your application

### GRANT ALLOCATION CRITERIA/LIMITATIONS:

- Only one (1) Grant will be available per ATDC Member organisation, so please ensure that your Manager has approved your application prior to it being submitted
- Due to the popularity of the Grants, the ATDC may offer you a partial Grant rather than the full amount you have applied for
- The course/training/qualification applied for cannot be part of induction or core training requirements that your organisation would ordinarily arrange and pay for
- The course/training/qualification must be provided by an agency/trainer external to your organisation
- Funding provided to each successful applicant is capped at **\$800.00 (+GST)**. It is expected that most applications would be below this amount but applications of up to \$800 will be considered
- Applications for funding must be made between 1 November 2019 and 1 March 2020, but the course/training/qualification being attended can be scheduled for any time up until 31 December 2020



- Applications must be received and assessed **prior** to the course/training/qualification being held - retrospective claims for funding towards courses/training/qualifications already attended will not be considered
- If for any reason a successful applicant is unable to attend the course/training/qualification, the funding must be returned to the ATDC. Allocated funds are not transferable to another staff member or another course/training/qualification without prior request and approval from ATDC

### HOW TO APPLY:

- Complete the ATDC Sector Development Small Grant Fund Application form (attached)
- Make sure a copy of the course /training/qualification you wish to attend is attached together with proof of costs associated (tax invoice/quote etc)
- Submit your application via email to [oliviam@atdc.org.au](mailto:oliviam@atdc.org.au)
- The ATDC will notify you of the outcome of your application within 14 days of receipt.

### SUCCESSFUL APPLICANTS:

If your application is successful:

- Ensure that you have registered and paid for the course/training/qualification you wish to attend
- Provide the ATDC with all relevant tax invoices and receipts to allow the financial acquittal process to occur
- Notify ATDC as soon as possible if the course is cancelled or you are no longer able to attend
- **After completing** the course/training/qualification, you will need to submit an Evaluation Form (attached) together with a summary of your learnings within 14 days.

### FOR MORE INFORMATION:

For more information on the ATDC Sector Development Small Grants Fund, contact:

Olivia Montgomery  
Sector Development Manager  
E: [oliviam@atdc.org.au](mailto:oliviam@atdc.org.au)  
P: 6231 5002



## ATDC SECTOR DEVELOPMENT SMALL GRANTS FUND APPLICATION FORM

### Eligibility Check list

- My organisation is a current ATDC Full Organisational Member
- The course/training/qualification I have selected will directly improve client outcomes and improve my AOD skills and knowledge
- I have attached a copy of the course/training/qualification details, including the associated costs
- My Manager has approved this application
- The course/training/qualification is not part of any induction or core training requirements of my organisation
- The course/training/qualification is being provided by an agency/trainer external to my organisation

<b>ATDC Member Organisation Name:</b>	
<b>Name of Applicant:</b>	
<b>Position/Role Title:</b>	
<b>Title of course/training/qualification :</b>	
<b>Date(s) of course/ training/ qualification:</b>	
<b>Location of course/training/qualification:</b>	
<b>How much funding are you requesting?</b> (to a maximum of \$800 +GST)	
<b>What are these requested funds to be used for?</b>	(Please tick all appropriate categories with an amount for each)  <input type="checkbox"/> Course fees \$ _____ <input type="checkbox"/> Accommodation \$ _____ <input type="checkbox"/> Travel \$ _____ <input type="checkbox"/> Purchase of materials/resources \$ _____ <input type="checkbox"/> Other (please detail)



<p><b>What do you hope to gain from this course/training /qualification?</b> Add extra page if needed</p>	
<p><b>Have you accessed the ATDC's Sector Development Small Grant Funds before?</b></p>	<p>YES                      NO</p> <p>If Yes, when, and how much was granted? DATE:                      AMOUNT:</p>
<p><b>Are you prepared to complete a short evaluation and provide a summary of your learnings after the course/training/ qualification?</b></p>	<p>YES                      NO</p>

Signed.....

Date.....

Submit your completed application form via email to [oliviam@atdc.org.au](mailto:oliviam@atdc.org.au)

**ATDC OFFICE USE ONLY:**

GRANT APPLICATION NUMBER:	
AMOUNT REQUESTED:	
APPROVED/DECLINED:	
DATE GRANTED:	

RECEIPTS RECONCILED:	YES	NO	DATE
REPORT BACK:	YES	NO	DATE
EVALUATION COMPLETE:	YES	NO	DATE



## ATDC SECTOR DEVELOPMENT SMALL GRANTS FUND EVALUATION FORM

<b>ATDC Member Organisation:</b>	
<b>Name of Applicant:</b>	
<b>Title of course/training/qualification:</b>	
<b>Date(s) of training:</b>	
<b>Location of training:</b>	
<b>Were your expectations and goals of the course/training/qualification met?</b> Briefly explain why - add another page if needed	YES                      NO
<b>What were the strengths and weaknesses of the course/training/qualification?</b> Briefly explain - add another page if needed	
<b>Would you recommend this course/training/qualification to others?</b> Briefly explain why - add another page if needed	YES                      NO
<b>Please attach a short (max 1 page) summary of your learnings.</b>	

Signed.....

Date.....