



Application Form – Mibilla Foundation Grow Grant

Contact Information

Contact Name	J Smith
Organisation / business name	Health 4 U
ABN (if you have one - not required)	22 222 222 222
Address	123 Example Street, Exemptown, QLD, 1010
Email	health4U@example.com
Phone	0000 000 000
Website / Social Media	Facebook: Health 4 U

Eligibility

Applicants must:

- Based in Australia
- Use funds for the benefit of Aboriginal and/or Torres Strait Islander people or communities in Australia

And be one of the following:

- Aboriginal and/or Torres Strait Islander owned and operated business
- Aboriginal and/or Torres Strait Islander owned and operated community organisation or not-for-profit
- Non-Indigenous organisation working in genuine partnership with Aboriginal and/or Torres Strait Islander communities or organisation

If you are a non-Indigenous organisation: Briefly describe your partnership and how Aboriginal and/or Torres Strait Islander people are involved in leadership and decision-making

We partner with a local Aboriginal community group who co-design and co-deliver our programs.

Aboriginal leadership is involved through:

- Joint planning meetings
- Community-led facilitation
- Input into program design and delivery

The partnership ensures cultural appropriateness and community ownership.



About You & Your Organisation

Tell us about your organisation or business

We are a regional health organisation delivering wellbeing programs across multiple communities. We:

- Deliver health education workshops
- Provide outreach services
- Work in partnership with local organisations

Our programs support improved health outcomes for Aboriginal communities.

How long have you been operating?

- Less than 6 months
- 6 - 12 months
- 1 - 3 years
- 3+ years

Funding Activity

What will you do with this funding?

We will:

- Expand delivery of our existing workshops into 3 additional communities
- Cover travel and accommodation costs
- Engage additional facilitators

This builds on an existing program and increases reach.

What will increase or improve in your organisation as a result of this funding?

- Increase program delivery locations from 1 to 4 communities
- Increase number of workshops delivered
- Increase participant numbers
- Expand facilitator capacity to support delivery
- Improve operational reach and program consistency

What challenge or opportunity will this funding help address?

There is demand from additional communities that we cannot currently meet. Currently, we are limited by:

- Travel costs
- Facilitator availability



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Impact & Benefit

Who will benefit from this and what difference will it make?

- Aboriginal community members in additional locations will gain access to health workshops
- Increase participation in health education programs
- Stronger partnerships with local Aboriginal organisations
- Improved awareness and early engagement in health and wellbeing

How will you know it's making a difference?

We will see:

- An increase in the number of workshops delivered
- An increase in participant attendance
- Positive feedback from communities

Funding Request

How much funding are you seeking?

\$4,500

Type of funding activity

- Equipment and Tools
- Staffing and Contractors (Short-term)
- Program or Service Expansion
- Adding a New Service (Expansion Only)
- Systems and Operations
- Marketing and Promotion (linked to growth)
- Training and Capability Building
- Evaluation and Improvement

How will the funding be used?

Item	Cost
Travel (fuel + accommodation)	\$1,500
Facilitators	\$2,500



Supporting Documents

Please attach any of the following documents

- Business plan
- Budget
- Quotes or pricing evidence
- Letters of support
- Photos, visuals, or examples of previous work
- Certificates or compliance documents

- I have read the Mibilla Mob Commitment section in the guidelines and understand I must contribute if my application is successful
- This is the first time I have written a grant application
- I declare that the information provided is true and correct to the best of my knowledge.