





WA Community Grant Program Application Form

Instructions:

- **1.** Before completing this application, ensure:
 - I have read and understood BHP's WA Community Grants Program Application Guideline
 - I have read BHP's Code of Conduct
 - I confirm my organisation and project is eligible

(incorporated, not-for-profit or educational institution and based in or deliver services in one of BHP's host communities).

- 2. If you require any assistance with completing this Application Form, please contact wacommunitygrants@bhp.com
- 3. Please complete this Application Form, ensure all sections are complete, arrange signature from your organisation's Responsible Person (Board or Committee member) or Key Management Personnel (Chief Executive Officer, Chief Financial Officer).
- 4. Submit your completed Application Form to wacommunitygrants@bhp.com

Port Hedland and Newman:

Applications are open all year round.

Kalgoorlie, Kambalda, Leinster, Leonora, Wiluna and Kwinana:

Applications must be submitted by 11.59PM WST on:

Round 1: 11 March

Round 2: 11 August

Round 3: 11 November

Hard copy applications will not be considered.



ABOUT YOUR ORGANISATION

| Organisation | Trading name: | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--|--|
| | Address: | | |
| | ABN: | | |
| | Website: | | |
| Key Contact Person | Person Name: | | |
| | Position: | | |
| | Address: | | |
| | Telephone: | | |
| | Email: | | |
| Background | Overview of the organisation | | |
| Type of organisation | Incorporated association | | |
| | Not-for-profit organisation | | |
| | Educational institution | | |
| | Aboriginal Corporation | | |
| | Government entity | | |
| | | | |
| Is there a related Association for your organisation in your town or region? | If yes, please provide the name of the Association: | | |
| Do you currently receive any funding from BHP? | If yes, please identify for what purpose: | | |
| Please list all the officers, directors, partners or other persons with executive or management authority in your organisation. Include the full name and position and country of residence | | | |





| Will your organisation grant some or all of the funding received to others? (e.g. subgrant, vouchers) | Yes If yes, please identify for what purpose: | |
|-------------------------------------------------------------------------------------------------------|------------------------------------------------|--|
| | No | |

ABOUT YOUR PROJECT

| Project name: | | |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Requested amount from BHP: | | |
| Geographical areas supported by this project: | Port Hedland Newman Kalgoorlie Kambalda | Leinster Leonora Wiluna Kwinana |
| Project start date: | | |
| Project end date: | | |
| Project description: Please state what the requested grant will be used for and describe the benefit to the local community. | | |
| Which of our priority focus areas best describes your project? Select all that apply. | Decarbonisation Healthy environment Indigenous partnerships | Safe, inclusive and future ready workforce Thriving, empowered communities Responsible supply chains |

| Who are your target beneficiaries? Select all that apply. | Indigenous peoples Females School aged | Tertiary/post secondary Elderly All community Other (please specify) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| How many people will directly and indirectly benefit from the project? Estimate only. | Directly: Indirectly: | |
| What are the goals and expected outcomes your project sets out to achieve and how will this be measured? (e.g. attaining a keynote speaker for the event, desired outcome is it will attract attendees to raise awareness for the community project, success will be measured by number of attendees and post event feedback). | | |
| How is your project unique and how does it meet local community needs? (e.g. develops capacity, no other local organisation provides, value for money, helps build the organisation's sustainability?) | | |
| Are there any risks associated with the delivery of your project and how will these be managed? | | |
| How will BHP be recognised for a contribution to your project? *Please see BHP WA Community Grant Guidelines for donation recognition ideas | Flyers, brochures, event programs Local print media Social media Invitation to the event Local media (print, radio, TV) | Printed merchandise Signage Acknowledgement in speeches/formalities Other (please specify) |

PROJECT BUDGET AND FUNDING

| PROJECT BUDGE | T AND FUND | ING | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----|-----------------------------------|-----------------|
| Project budget breakdown | Use template below or attach to application. | | | |
| | Income AUD Expenditure AUD | | | D |
| Please provide as much detail as is practically possible to breakdown how the funds will be used. Total income and total expenses should be equal. | Amount contributed by your own organisation | \$ | Salaries, fees, wages | \$ |
| | BHP requested amount | \$ | Training or facilitator | \$ |
| | Other confirmed funds | \$ | Equipment hire, venue hire | \$ |
| | Other requested funds | \$ | Advertising, promotional expenses | \$ |
| | In-kind support | \$ | (add item here) | \$ |
| | (add item here) | \$ | (add item here) | \$ |
| | (add item here) | \$ | (add item here) | \$ |
| | (add item here) | \$ | (add item here) | \$ |
| | (add item here) | \$ | (add item here) | \$ |
| | TOTAL | \$ | | \$ |
| How will the BHP funds be used? Please provide as much detail as is practical to explain what the funds requested from BHP will be specifically used for. For example, if the overall project is a Community Garden, the BHP funds will be used to install garden beds and reticulation. | | | | |
| Are other contributions expected? | Organisation | | Amount | Confirmed (Y/N) |
| Please list the other confirmed and expected funds, amount and whether the contribution has been confirmed or not. | | | | |
| | | | | |

| If you have not yet confirmed all the income required for this project, how do you intend to obtain additional income? | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| ETHICS AND COMPLI | ANCE REQUIREMENT DISCLOSURES | | |
| Minimum Requiremen | nts | | |
| | n-Suppliers <u>here</u> sets the minimum health, safety, environment, community for all non-suppliers to BHP. Adherence to our Minimum Requirements for oing business with BHP. | | |
| Does your organisation meet the BHP Minimum requirements? Checking 'Yes' | Yes, agree to meet BHP's Minimum Requirements for Non-Suppliers | | |
| indicates your Organisation will adhere to all of these requirements. | Yes, already commit to equivalent or higher standards | | |
| Compliance | | | |
| These questions are part of our compliance review. Please answer each of the questions below truthfully and to the best of your knowledge. For purposes of these questions: *"Government Official" includes: officers or employees of government, government departments or government agencies officers or employees of government-owned or controlled entities including state owned companies officers or employees of a public international organisation political parties, political party officials, or candidates for public office individuals who hold or perform the duties of an appointment, office or position created by custom or convention people who hold themselves out to be the authorised intermediary of a government official **"People who Represent Others" means: Individuals who represent other people, perform activities on behalf of a body of people, or owe duties of trust to a broader group of people, including: Union leaders Community leaders Indigenous leaders Heads of stakeholder groups and their agents or representatives | | | |
| Are any employees, directors, be beneficial owners of your organis | | | |
| Provide details (name, organisation, position): | | | |

| Are any employees, director beneficial owners of your or | Yes | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| | | No |
| Provide details (name, organisation, position): | | |
| Are any employees, director beneficial owners of your or Others**? | Yes | |
| Citions . | | No |
| Provide details (name, organisation/group, position): | | |
| In the past five (5) years has entities or predecessor orga officer, director, employee ballegation of fraud, misrepre | Yes | |
| evasion, trade non-compliance (including economic sanctions, export controls and US antiboycott law) or other related activities in any country? | | No |
| Provide details of the investigation or allegation and who from the position of the person involved (where applicable): | | |







Certification from your organisation's Responsible Person (Board or Committee member) or Key Management Personnel (Chief Executive Officer, Chief Financial Officer).

BHP is collecting personal information (including contact details about you and other relevant contacts) for business-related purposes (including but not limited to conducting due diligence clearance procedures, managing accounts and records, communicating with you and third party contacts and complying with our legal and regulatory obligations). If you do not provide this information, it may affect how we interact with your company. If you provide us with personal information relating to another individual, you warrant and represent to us that you have obtained the consent of that individual to provide us with their personal information.

to us that you have obtained the consent of that individual to provide us with their personal information. For more information on how BHP deals with personal information, please see the BHP Global Privacy Policy. I certify that the information and responses provided in this application are true and accurate. I have read and understood BHP's WA Community Grants Program Application Guideline. I have read and understood BHP's Code of Conduct. The Chief Executive Officer of my organisation is aware of this application I give permission to BHP to contact any relevant persons or organisations in the processing of this application. I certify that a completed Evaluation Form has been submitted to BHP for all previous BHP fundina. I understand that if my organisation gains funding through the BHP WA Community Grants Program, we are required to return an Evaluation Form within four weeks of project completion. If this is not completed it may preclude my organisation from receiving future funding from BHP. All sections of this application form are complete. Name Position **Email** Signature Date of signing