



Application Form

Cyber Security Small Business Program

Version 7 November 2018

This document shows the questions included in the online application form for this grant opportunity. It will help you prepare your responses and the mandatory attachments you need before you apply online.

Do not use this document as your application form. You will need to submit an application using the online form once the grant opportunity is open to applications.

Instructions

About the Cyber Security Small Business Program

The Cyber Security Small Business Program (the program) will run over two years from 2018-19 to 2019-20. The program was announced as part of [Australia's Cyber Security Strategy](#)¹.

The objective of the program is to improve cyber security for Australian small businesses.

The Australian Government has announced \$10 million available over two years for this grant opportunity.

Completing this form

You should read the [Cyber Security Small Business Program grant opportunity guidelines](#) (guidelines) before filling out this application.

You must have completed, and paid for, a CREST small business cyber security health check before you can submit this form.

System information: The smartform will not have the following list as it has tabs displayed for navigation. This list is only for the word-fillable form.

This application form contains the following:

- Part A – Eligibility
- Part B – Contact details
- Part C – Applicant information
- Part D – Cyber security health check details and funding
- Part E – Applicant declaration

Disclosure of personal and confidential information

The Commonwealth's use and disclosure of both your personal and confidential information (provided in this application or otherwise) is set out in the Cyber Security Small Business Program guidelines. Ensure that you have read this document and understand the information contained therein. For further information regarding the Department of Industry, Innovation and Science's (the department's) obligations in accordance with the Privacy Act, refer to the department's [Privacy Policy](#)².

Getting help

If you require assistance completing this application form or are unable to use the online form you can contact us on 13 28 46 or at [business.gov.au](#). Our website and staff can help you with forms, finding information and services and allow you to provide feedback.

You should also ensure you have read the guidelines and sample [grant agreement](#) before seeking help. View these documents at [business.gov.au](#).

¹ <https://cybersecuritystrategy.pmc.gov.au/assets/img/PMC-Cyber-Strategy.pdf>

² <https://industry.gov.au/Pages/PrivacyPolicy.aspx>

Submitting your application

We will close the application form once funding for the round has been fully committed or at 5.00pm [AEST/AEDT] on [closing date]. We cannot accept late applications.

Sample

A. Eligibility

A.1. Eligible entities

This section will help you determine whether you are an entity eligible for the grant opportunity.

System information: The online form asks the following questions individually and prevents the applicant from proceeding further if they answer incorrectly. A standard message appears. The applicant is allowed to alter their answer to any question.

No attachments should be requested in the Eligibility section.

You are required to answer all questions in this section.

Is your organisation:

- an entity incorporated in Australia
- an incorporated trustee on behalf of a trust
You must be able to provide trust documents on request showing the relationship of the incorporated trustee to the trust.
- a partnership
- a sole trader
- none of the above

If you have answered '**none of the above**' to the question above you are **not** eligible to apply for this grant opportunity.

Is your organisation a publicly funded research organisation (PFRO)? yes no

All higher education providers listed in Table A and Table B of the Higher Education Support Act 2003 (cth) and corporate Commonwealth entities, and State and Territory business enterprises which undertake publicly funded research.

Is your organisation a Commonwealth, State/ Territory or local government agency, body or government business enterprise? yes no

If you answered '**yes**' to either of the questions above you are **not** eligible to apply for this grant opportunity.

A.2. Additional eligibility criteria

This section will help you determine whether you comply with additional eligibility criteria for the grant opportunity.

You are required to answer all questions in this section.

Have you had a small business cyber security health check conducted by a [CREST](#) approved provider? yes no

You will need to provide a tax invoice quoting a CREST test certificate number as evidence later in this form.

Does your organisation have an ABN? yes no

For trustees applying on behalf of a trust, this refers to the ABN of the trust.

Is your organisation registered for GST? yes no

For trustees applying on behalf of a trust, this refers to GST registration of the trust.

Does your organisation employ 19 or fewer full-time equivalent employees? yes no

If you answered 'yes' to all of the questions above you are eligible to apply for this grant opportunity.

For further information regarding eligibility requirements refer to the Cyber Security Small Business Program [grant opportunity guidelines](#).

Sample

B. Contact details

B.1. Details of primary contact

Person authorised to act on behalf of the applicant.

The fields below are mandatory except for title.

Provide details of the primary contact.

Title

Given name

Family name

Position title

Phone number

Mobile number

Email address

Provide the postal address of the primary contact

Address

Suburb/ town

State/ territory

Postcode

Country

Australia

B.2. How did you hear about the grant opportunity?

--- Please select ---

If Other, please specify:

C. Applicant information

C.1. Type of applicant

System information: The Smartform will be able to prepopulate this information based on the applicant's answers from section A1.

In this section you must indicate your entity type.

All entities must have an ABN.

Select your entity type

- entity incorporated in Australia
- incorporated trustee on behalf of a trust
- partnership
- sole trader

C.2. Applicant details

If you are applying as a trustee on behalf of a trust leave this question blank and go to the next question.

Australian Business Number (ABN)

Australian Company Number (ACN)

If applicable

Entity name

The entity name refers to the legal/registered name that appears on official business documents. The entity name may be different from the business name.

Business/trading name

Your organisation may have one or more registered business names. Provide any relevant business or trading names here.

GST registered?

yes no

yes no

C.3. Trustee and trust details

Australian Business Number (ABN) of the trustee

(if different to trust, otherwise leave blank)

Australian Company Number (ACN) of the trustee

Entity name of the trustee

The entity name refers to the legal/registered name that appears on official business documents. The entity name may be different from the business name.

Australian Business Number (ABN) of the trust

Entity name of the trust

Business/trading name

Your organisation may have one or more registered business names. Provide any relevant business or trading names here.

Is the trust GST registered?

yes no

C.4. Indigenous ownership

Is your organisation a small to medium business with at least 50% Indigenous ownership?

C.5. ANZSIC details

System information: The smartform will not have the note regarding ANZSIC codes with hyperlink and contact phone number as the form will have this information imbedded.

What is your organisation's main revenue earning activity under the Australian and New Zealand Standard Industrial Classification (ANZSIC)?

The ANZSIC codes and titles are available from the [Australian Bureau of Statistics \(ABS\) website](#). Phone 13 28 46 if you require assistance.

C.6. Address details

Provide your **organisation's street address** (Australian head office).

Address

Suburb/ town

State/ territory

Postcode

Provide your **organisation's postal address**.

- Same as your street address, go to next section.
- Different to your street address, provide details below.

 Address

 Suburb/ town

 State/ territory

 Postcode

 Country Australia

C.7. Website address

Provide your organisation's website address.

C.8. Latest financial year figures

System information: Collect only the latest year's financial information.

Has your organisation existed for a complete financial year? yes no

If you answered 'yes', enter the latest completed financial year, then complete the table below.

Example entry 2013-14

If you answered 'no', enter the number of months your organisation has existed, then complete the table below. months

We collect the following data from all applicants across all grant programs. We use this data to better understand your organisation and to help us develop better policies and programs.

All amounts in the table below must show a whole dollar value e.g. \$1 million should be presented as \$1,000,000. The turnover value must be that of the entity that is making the grant application (the 'applicant'), regardless of whether the entity belongs to a consolidated group for tax purposes.

These fields are mandatory and entering \$0 is acceptable if applicable for your organisation. If they clearly do not apply to your organisation you may select 'not applicable'.

System information:

Provide the option for n/a on all data points for this application form.

Recent trading performance

Check box if the indicator is not applicable to your organisation

Figures for the latest full financial year

Sales revenue (turnover)

n/a

\$

Total revenue from the sale of goods and services, as reported in your organisation's Business Activity Statements (BAS).

Recent trading performance	Check box if the indicator is not applicable to your organisation	Figures for the latest full financial year
Export revenue <i>Total revenue from export sales, as reported in your organisation's BAS.</i>	<input type="checkbox"/> n/a	\$
R&D expenditure <i>Expenditure on research and development, i.e. creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society, and the use of this stock of knowledge to devise new applications.</i>	<input type="checkbox"/> n/a	\$
Taxable income <i>Taxable income or loss as reported in your organisation's income tax return form.</i>	<input type="checkbox"/> n/a	\$
Employees, including working proprietors and salaried directors (headcount) <i>Number of individuals who are entitled to paid leave (sick and holiday), or generate income from managing your organisation.</i>	<input type="checkbox"/> n/a	
Independent contractors (headcount) <i>Number of individuals engaged by your organisation under a commercial contract (rather than an employment contract) to provide employee-like services on site.</i>	<input type="checkbox"/> n/a	

D. Cyber security health check funding

D.1. Cyber security health check cost

Provide details on your small business cyber security health check costs.

Amounts must be GST exclusive,

We only provide grant funding based on eligible expenditure. Refer to the guidelines for guidance on eligible expenditure.

Eligible expenditure item	Total
CREST small business health check	\$
Grant amount	\$

You must provide a tax invoice quoting a CREST test certificate number as evidence.

System information: Ensure the smartform allows the applicant to attach a file.

The wording 'you must' indicates it is mandatory so applicants should not be able to submit their application without adding at least one attachment.

E. Payee details

If your application is successful we will pay the grant directly into your bank account. Provide your relevant bank account details here. To avoid payment delays please ensure your bank account details are correct.

Name of banking institution

Payee name

BSB

Account number

Conflicts of interest

Template instructions: This section is mandatory and should not be altered without discussion with the AusIndustry Assurance Manager.

Do you have any perceived or existing conflicts of interest to declare? yes no

Refer to the [program/grant opportunity] guidelines for further information on your conflict of interest responsibilities.

If yes, describe the perceived or existing conflict/s of interest and how you anticipate managing them.

750 character limit (including spaces)

Sample

F. Applicant declaration

F.1. Privacy and confidentiality provisions

I acknowledge that this is an Australian Government program and that the department will use the information I provide in accordance with the following

- [Australian Government Public Data Policy Statement](#)
- [Commonwealth Grants Rules and Guidelines](#)
- grant opportunity guidelines
- applicable Australian laws.

Accordingly, I understand that the department may share my personal information provided in this application within this department and other government agencies:

- a. for purposes directly related to administering the program, including governance, research and the distribution of funds to successful applicants and
- b. to facilitate research, assessment, monitoring and analysis of other programs and activities unless otherwise prohibited by law.

I understand that where I am successful in obtaining a grant, the financial information that I provide for the purposes of payment will be accessible to departmental staff to enable payments to be made through the department's accounts payable software system.

I understand that information that is deemed 'confidential' in accordance with the guidelines may also be shared for a relevant Commonwealth purpose.

The department will publish information on individual grants in the public domain, including on the department's website, unless otherwise prohibited by law.

F.2. Applicant declaration

I declare that I have read and understood the grant opportunity guidelines, including the privacy, confidentiality and disclosure provisions.

I declare that the proposed project outlined in this application and any associated expenditure has been endorsed by the applicant's Board or person with authority to commit the applicant to this project.

I declare that the applicant will comply with, and require that its subcontractors and independent contractors comply with, all applicable laws.

I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, accurate, complete and not misleading and that I understand that giving of false or misleading information is a serious offence under the *Criminal Code 1995* (Cth).

I acknowledge that I may be requested to provide further clarification or documentation to verify the information supplied in this form and that the department may, during the application process, consult with other government agencies, including state and territory government agencies, about the applicant's claims and may also engage external technical or financial advisors to advise on information provided in the application.

I acknowledge that if the department is satisfied that any statement made in an application is incorrect, incomplete, false or misleading the department may, at its absolute discretion, take appropriate action. I note such action may include excluding an application from further consideration; withdrawing an offer of funding; using the information contained in the application for a fraud investigation that would be consistent with the Australian Government's Investigations Standard and Commonwealth Fraud Control Framework and for management purposes and/or terminating any grant agreement between the Commonwealth and the recipient including recovering funds already paid.

I acknowledge that this application comprises an offer to enter into a legally binding agreement with the Commonwealth. If this application is successful, the Commonwealth may accept this offer by sending me a letter of approval with annexed Grant Terms and Conditions a copy of which is available on business.gov.au. On receipt of this letter, I will immediately be bound by a legally binding agreement comprising:

- this application
- the grant opportunity guidelines in place at the time I submitted the application form
- the letter and annexed Grant Terms and Conditions.

I agree to participate in the periodic evaluation of the services undertaken by the department.

I declare that I am authorised to complete this form and acknowledge that by including my name in this application I am deemed to have signed this application.

I approve the information in this application being communicated to the department in electronic form.

By checking this box I agree to all of the above declarations and confirm all of the above statements to be true

System information: The following signature block is only required for the word-fillable form. The smartform allows for a digital signature through the addition of the applicant's name and email address and a statement saying

"By including my name in this application it is deemed to be my signature for the purpose of this application. "

F.3. Signature

Name of signatory

Email address of signatory

Date

Signature