



ORAL HISTORY ASSOCIATION
OF AUSTRALIA (WA BRANCH) INC

PROJECT GRANT

Guidelines and Application Form

PO BOX 1065
NEDLANDS WA 6909

ABN 11 814 143 273

Email: info@ohaa-wa.com.au
Website: www.ohaa-wa.com.au

The Aim of the Grant Program

This grant scheme aims to foster small oral history initiatives in Western Australia. The Oral History Association of Australia (WA Branch) Inc (OHAA WA) supports and assists develop oral history projects in this State. We offer this grant scheme as a way to support an important means of recording WA's history.

Who Can Apply?

Applications are invited from individuals, community groups and voluntary organisations who have been members of the OHAA WA for a minimum of 12 months.

What Can Be Funded?

A single grant of up to \$500 is available for oral history projects such as:

- Community histories
- Institutional/Organisational histories
- Using oral histories for museum/local history interpretation
- Creative community arts projects

What Cannot Be Funded

- Ongoing salaries
- Purchase of equipment

How to Apply

Send completed application form, letters of support plus any other supporting material you wish to be taken into consideration by the panel marked '**Grant Application**' to the **Oral History Association of Australia (WA Branch) Inc., PO Box 1065 Nedlands WA 6909.**

Application closing dates are as follows:

- 31 January
- 30 April
- 31 July
- 30 October

Selection

Applications are evaluated by a panel determined by the Association's Committee according to the following criteria:

- The project, its significance, anticipated end use, process and outcomes are clearly explained
- The project is costed as accurately as possible

The panel may give preference to projects that include a financial/in-kind contribution from the applicant organisation.

Payment of Grants

Grants are in the form of a one-off up-front payment. To claim grants successful recipients must

Send an invoice to the OHAA WA for the grant amount and include the following

- You/your organisation's name, address and ABN (if applicable)
- Date of issue
- The grant amount

Conditions of Grants

Grants may be used only for the purposes specified in the letter of approval.

The OHAA WA is to be advised of any proposed changes to the project and any changes of contact details.

Acknowledgement of OHAA WA support to be included in any publications, interviews and promotional materials related to your project.

Details of successful applications may appear in OHAA publications, website and promotional materials.

Signed consent forms to be obtained from interviewees.

Copies of oral histories to go in public repository, such as State Library of WA and/or Local Studies Library.

A report of the outcomes of the grant is to be forwarded to the OHAA WA within 3 months of the completion of the project.

Notification

Successful grant recipients will be notified by mail.

Interviewers must have oral history training such as the OHAA WA's training workshops. Otherwise, use of professional oral historians is encouraged and collaborative projects are welcomed. A copy of the Association's Directory of Oral Historians and our fees guidelines can be obtained from our website: www.ohaa-wa.com.au



ORAL HISTORY ASSOCIATION OF AUSTRALIA (WA BRANCH) INC.

PROJECT GRANT APPLICATION FORM

Name/Organisation _____
Address _____
_____ Post Code _____
Contact person _____
Telephone Nos. _____
Email: _____

Project Overview
Project Description

What is the significance of the project to your organisation?

Project Details

What is the scope of your project? (e.g. number of interviews to be carried out)

How will the project be carried out?

How many people will be involved? In what capacities?

What are the estimated commencement and completion dates of the project?

**Have you received any grants over \$500 within the last two years?
Please specify source, amount and purpose. Write N/A if none were received.**

Financial details of project

Amount of grant requested	\$
Own cash contribution	\$
Other contributions (e.g. other grants/in-kind)	\$ _____
<i>Total cost of project</i>	\$

DECLARATION ON BEHALF OF APPLICANT

I certify on behalf of the applicant that grants received from the Oral History Association of Australia (WA Branch) Inc. will be spent in the manner approved by the WA Branch. Any proposed alteration to the project will be referred to the WA Branch for its prior approval.

Name _____

Address _____

Position in organisation _____

Signature

Witness

Date of application _____

Attachments:

- Constitution (if incorporated)**
- Letters of support**

Return application form to:

**Oral History Association of Australia (WA Branch) Inc.
PO BOX 1065
NEDLANDS WA 6909**

Email: info@ohaa-wa.com.au
Website: www.ohaa-wa.com.au

**We encourage all prospective oral historians to join the
Oral History Association of Australia (WA Branch) Inc
to help us fulfill our objectives**