All West Australians Reducing Emergencies (AWARE) 2026-27 Application Form

* indicates a required field

Eligibility Check

The Eligibility Checklist below outlines the requirements applicants must meet to apply for AWARE funding. Applicants need to click "Yes" against each requirement to be considered eligible to apply.

My Organisation *
☐ Is a local government within Western Australia
☐ Will comply with the terms in the Funding Agreement
☐ Has the capacity to deliver this project
☐ Is compliant with AWARE, Disaster Ready Fund (DRF) and National Disaster Risk Reduction (NDRR) grants (i.e. has no current non-compliant grant projects)

My Project *
☐ Will only commence after signing the Funding Agreement
☐ Delivers community outcomes and does not provide a commercial advantage
☐ Has realistic and credible outcomes, outputs, timeframes, milestones and budget
☐ Is not applying for funds for a capital or asset purchase, or an upgrade or maintenance
☐ Will commence prior to 1 May 2027

My Application *
☐ Is endorsed by the Chief Executive Officer (or equivalent) and Chief Financial Officer (or equivalent)
☐ Requests funding between $2,500 and $35,000, including local level risk assessment projects – no GST applied
☐ Contributes at least 25% of the project's total costs in cash and/ or in-kind contributions

Contact Information

* indicates a required field

Name of the Applicant Organisation *
Organisation Name

Name of the organisation applying for the grant.

Applicant Office Address *
Address

Applicant Office Phone Number *

Applicant Office Email *

Must be an email address.

Project Manager *

Title | First Name | Last Name

Position *

Primary Address *

Address

Primary Email *

Must be an email address.

Office Phone Number *

Alternate Project Contact *

Title | First Name | Last Name

Position *

Office Address *

Address

Office Phone Number *

Office Email *

Must be an email address.

Project Information

Project Title *

Project Start Date *

Must be a date and no earlier than 7/12/2026.
The project can only commence after the execution of the Funding Agreement by both parties. Any project activities conducted by successful projects before the establishment of Funding Agreement will be deemed ineligible for funding.

Project End Date *

Must be a date.
Project end date must be within 12 months of the start date, excluding the final report milestone.

Short Project Description *

Word count:
Must be no more than 100 words.
Provide a short description about the project including its aim and proposed outcomes.

Project Categories
☐ Furthering the emergency risk management process
☐ Facilitating capability-based exercises
☐ Projects that support the review and improvement of Local Emergency Management Arrangements (LEMA)
☐ Delivering emergency management training, events or forums

Please note:

AWARE projects aimed at delivering emergency management training, events or forums must not have any deliverables or expenditure incurred prior to co-signing of the Funding Agreement by both parties.

DFES reserves the right to cancel projects if identified that the project commenced prior to the co-signing of the Funding Agreement by both parties.

DFES is not responsible or will not be held responsible for any costs incurred prior to the co-signing of the Funding Agreement by both parties.

I confirm that I understand the above requirements. *
○ Yes

Please note:

All LEMA review projects must include milestones to indicate required approvals.

1. LEMA approved by the LEMC and the Council
2. LEMA approved by the DEMC
3. LEMA noted by the SEMC

I confirm that I understand the above requirements. *
○ Yes

Application Assessment

* indicates a required field

Assessment Criteria

Applications that meet the Eligibility Criteria will be assessed using the pre-determined selection criteria.

All questions in the application contribute to the assessment of the selection criteria. The selection criteria will be applied once the preliminary review has been undertaken and core eligibility components have been deemed to be met. Assessment of the selection criteria is weighted. Selection criteria are grouped into the following categories:

Assessment Categories

Score

Validity of the project

20

Benefit of the project

20

Value of the project

20

Project Deliverables Achievability

20

Capacity to Deliver the project

20

Validity of the Project: Score: 20

1. Capacity or Preparedness – explain how your project will enhance emergency management capacity or preparedness at a local or district level? *

Word count:
Must be no more than 250 words.

Benefit of the Project: Score: 20

This criterion addresses how the project will provide community outcomes and be sustained once grant funding ceases.

2. What areas of the State will your project benefit? *

- ☐ Kimberley
- ☐ Wheatbelt
- ☐ Central Metropolitan
- ☐ Pilbara
- ☐ Great Southern
- ☐ East Metropolitan
- ☐ Midwest – Gascoyne
- ☐ South West
- ☐ South Metropolitan
- ☐ Goldfields – Esperance
- ☐ North Metropolitan

At least 1 choice must be selected.

3. What are the project's benefits to the WA Community and how will they be sustained once grant funding ceases? *

Word count:
Must be no more than 250 words.

Value of the Project: Score: 20

This criterion considers the impact of the project in relation to its cost. This includes an assessment of the feasibility of conducting the planned activities within the described budget and timeframes. Please attach evidence such us quotes to support the AWARE funding request.

Total Project Cost *

Must be a dollar amount.
No GST. The Total Project Cost must equal the budget total from the budget table below.

AWARE Funding Amount Requested *

Must be a dollar amount.
AWARE sum (No GST) requested cannot be more than 75% of total project budget cost

Total Co-Contribution *

Must be a dollar amount.
25% of the total project cost (cash and in-kind combined - No GST)

I confirm that this application meets the minimum co-contribution requirement of 25% of the project cost. *

○ Yes

Budget

The Grantee agrees

- to provide the following cash or in-kind contribution to the budget.
- to use the Grant (and any Other Contributions – cash and/ or in-kind) to undertake the Activity consistent with the following budget.
- ***to provide quotes as an attachment to the application in line with the budget figures where appropriate.***

Description (include all expenditure e.g. labour, consultancy fees, etc)	**Agency/Organisation (Include all project partners)**	**Funding Source**	**Amount (No GST)**
(include all expenditure e.g. labour, consultancy fees, etc)	Name of project partners contributing to the project	AWARE, Cash, Inkind	Must be a dollar amount.

Budget Total

This number/amount is calculated.
The budget total must equal the Total Project Cost.

Project Deliverables Achievability: Score: 20

This criterion assesses if the project deliverables are clear, appropriate and realistic. This includes the relationship between outputs and outcomes and the likelihood of achieving both.

Key Performance Indicators

Key Performance Indicators (KPIs) are specific, actionable and realistic benchmarks used to evaluate progress against a particular outcome (both tangible and intangible actions or products the project will deliver) over time.

Evaluation Criteria is the method used to measure the success of each KPI.

Key Performance Indicators	Evaluation Criteria

Milestones

List the milestones of your project (consider your KPIs when setting the key milestones that will be demonstrating your project progress).

The last milestone of all projects must be "Final report submitted to DFES for approval" . The project end date must align with the second last milestone for the project.

Milestones	Date of Completion
	Must be a date.

Capacity to Deliver the Project: Score: 20

This criterion considers whether the organisation is positioned to deliver the project and achieve the proposed outcomes including sufficient and suitable staff allocation to manage, support and deliver the project.

Provide a summary of skills and experience of the key personnel working on your project.

Name and Role	Organisation	Relevant Skills and Experience
	Organisation Name	
	Organisation Name	
	Organisation Name	
	Organisation Name	
	Organisation Name	

Declaration

I declare that I have read and understood the AWARE2627 Guidelines and certify that the application is complete and accurate and that I have provided claims truthfully and to the best of my abilities. *
○ Yes

I declare that I'm aware that projects cannot commence until Funding Agreements are co-signed by all parties. DFES will not be responsible for any expenditure applicants incur, until such time as the Funding Agreements are endorsed. *
○ Yes

I declare that my organisation and project meet all eligibility requirements. *
○ Yes

I declare that I am authorised to submit this application on behalf of my organisation, and I will be required to enter into a contractual agreement with the DFES if I am successful. *
○ Yes

I declare that this application has endorsement from both the Chief Executive Officer (or equivalent) and the Chief Financial Officer (or equivalent). *
○ Yes

Chief Executive Officer (or equivalent) *
Title First Name Last Name

Organisation *

Phone Number *

Date *

Must be a date.

Email *

Must be an email address.

I endorse the above application *

○ Yes ○ No

Chief Financial Officer (or equivalent) *

Title First Name Last Name

Organisation *

Phone Number *

Email *

Must be an email address.

Date *

Must be a date.

I endorse the above application *

○ Yes ○ No

Attachments (up to 25 MB)

Attachment 1
Attach a file:

Attachment 2
Attach a file:

Attachment 3

Attach a file:

Attachment 4
Attach a file: