Community Sponsorship Application Form
Form Preview

WorkSafe Community Sponsorship Application

* indicates a required field

Applicants: Please Note

WorkSafe is committed to reducing workplace harm and improving outcomes for injured workers.

Apply now for a WorkSafe Community Sponsorship for events and activities that complement our public awareness campaigns and provide a tangible link with the community.

Applicants have the ability to upload supporting documentation at the end of the application form.

To be considered, applications must be submitted prior to the closing date.

If you have any questions, please email: communitysponsorship@worksafe.vic.gov.au

Contact Details

Privacy Notice

WorkSafe Victoria is a body corporate established under Victorian workers compensation legislation.

Our functions and responsibilities require us to collect and handle large amounts of personal and health information about individuals, including injured workers, our employees and other persons, including contracted service providers, who assist us in the work that we do.

We are committed to the protection of your privacy and in our handling of personal and health information. In accordance with Victorian privacy laws and principles, we are required to take reasonable steps to let people know the sort of information we hold; the purposes for which we collect it; and, how we collect, hold, use and disclose that information.

This Privacy Statement explains our policy for handling personal information which you may provide to us when you access and interact with our website. This Statement should be read in conjunction with WorkSafe's Privacy Policy, which sets out why and how we collect, use, disclose, store and handle personal and health information.

To access and download WorkSafe's Privacy Policy click here.

Applicant *
○ Individual ○ Organisation
Organisation Name

Title | First Name | Last Name

Applicant ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity Name	
ABN Status	
Entity Type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

Must be an ABN.

Applicant Primary Address
Address

Applicant Primary Phone Number

Must be an Australian phone number.

Applicant Primary Email *

Must be an email address.

Applicant Primary Website

Must be a URL.

Objective

Select the WorkSafe Community Sponsorship program objective/s your application most closely aligns *

☐ Raise awareness of, and increase positive regard for, WorkSafe with target audiences
☐ Build stronger relationships with the community in support of WorkSafe's role
☐ Actively engage with the community to build understanding of, and support for WorkSafe's vision and mission
☐ Inform the community and increase knowledge about WorkSafe's strategic messages

At least 1 choice must be selected.
For information about WorkSafe's role, vision and mission, target audience and strategic message, visit: www.worksafe.vic.gov.au/about-worksafe

Describe how the application aligns to the selected Community Sponsorship program objective/s *

Purpose

Describe the opportunity you are seeking sponsorship *

E.g. event, award ceremony, exhibition, program.

Describe the purpose of this opportunity *

E.g. awareness raising, recognition of excellence, community involvement.

Awareness and Reach

Please select relevant industry/ies your project will target

- ☐ Agriculture
- ☐ Forestry and Logging
- ☐ Mining
- ☐ Manufacturing
- ☐ Electricity, Gas, Water and Waste Services
- ☐ Construction
- ☐ Wholesale Trade
- ☐ Retail Trade
- ☐ Accommodation and Food Services
- ☐ Transport, Postal and Warehousing
- ☐ Transport and Warehousing
- ☐ Information and Telecommunications
- ☐ Financial and Insurance Services
- ☐ Real Estate Services
- ☐ Professional, Scientific and Technical Services
- ☐ Administrative and Support Services
- ☐ Public Administration and Safety
- ☐ Education and Training
- ☐ Healthcare and Social Assistance
- ☐ Arts and Recreation Services
- ☐ Healthcare
- ☐ Social Assistance
- ☐ Other:

Describe the target audience that will be reached through this opportunity *

E.g. people working in the agriculture industry, apprentices working in a trade, regional employers.

Describe how this audience will be engaged and the potential outcomes of this engagement *

Please include expected event attendance numbers (if applicable) and digital (social media) reach within this description.

Key Dates

Please list the key dates and WorkSafe's involvement in this opportunity

Key Milestone	Date	WorkSafe Involvement
E.g. Event date	Must be a date.	E.g. Speaking opportunity, event branding etc.

Benefits

List the benefits that are being offered to WorkSafe as part of this application

E.g. speaking opportunity, event activation, signage, digital engagement.

Funding

What is the requested funding amount? *

$

Must be a dollar amount.
If the application is tiered, please reference the most appropriate amount.

Co-Sponsors

Please provide details of all co-sponsors for the events/activties proposed.

Organisation Name	ABN	ACN
	Must be a number.	If the organisation does not hold an ACN please enter just the number 1. Must be a number.

Documentation

Upload supporting documentation
Attach a file:

We welcome supporting documentation but please ask that this be kept to no more than three A4 pages.