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| Communities and Justice | | |
| Application for consent to retain and use funds unspent in 2022–2023 | 17 July 2023 | |
| For service providers delivering funded contracts | |  |
|  | |  |

Instructions

Before filling in this form, read the [unspent funds requirements for the 2022–2023 financial year](https://www.facs.nsw.gov.au/providers/working-with-us/fcm-resources/annual-accountability/chapters/unspent-funds-requirements).

**You’re only required to complete this form if** your organisation intends to retain unspent funds **and** the unspent funds requirements for 2022–2023 state that you must apply for consent to retain and use those unspent funds.

**You must complete a separate form for each contract**.

When you’ve completed the form and signed the declaration, upload your application and any supporting documents to the Contracting Portal as part of the applicable contract-level accountability submission. We won’t consider applications lodged via email.

# Part 1. Application details

## Applicable contract

|  |  |  |
| --- | --- | --- |
|  | Date of application | Click here to enter a date. |
|  | Service provider name  This is the party currently holding the contract with DCJ. | <organisation name> |
|  | Service provider ID  This can be obtained from the DCJ portal. |  |
|  | Program name |  |
|  | Applicable contract | <Program contract ID> |
|  | Service provider’s representative  The contact person for this application. | Name:  Position:  Phone number:  Email address: |
|  | DCJ contract manager | <Name> |

## Unspent funds requested to retain and use for the program

|  |  |  |
| --- | --- | --- |
|  | Amount of unspent funds | <$ amount > |
|  | Reason the funds were unspent |  |
|  | Proposed use of the unspent funds  Explain how you plan to use the unspent funds, and how this will meet the core objectives of the program |  |
|  | Will the funds be used in the 2023–2024 financial year? | Yes  No |
|  | If ‘no’, when do you propose to use the funds? |  |
|  | Expected outcomes  List the expected outcomes. | * <Expected outcome> |
|  | Additional benefit to the program  Explain how the expected outcomes would be in addition to the normal contract outcome for which annual funding is provided. |  |

## Detailed plan, budget and timeframes for the expected outcomes to be achieved

<Insert here OR identify the title of a separate document containing this information, and upload the document to the Contracting Portal with this application form.>

# Part 2. Service provider’s declaration

As authorised representatives of <organisation name>, we confirm that:

* we are applying for consent to retain and use unspent funds for the nominated financial year;
* the proposed use of unspent funds, including services and activities detailed in the plan, aligns to the service provisions agreed in the contract;
* our governing body is aware of this application and the information submitted to DCJ in this application; and
* we warrant that all information provided by us in this application form is true and correct.

Please use the signature block that applies to your organisation. Note that each person signing for the organisation must be an [authorised or delegated signatory](https://www.facs.nsw.gov.au/providers/funded/resources/authorised-signatories).

#### Signature block for organisations with multiple authorised signatories

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name |  | Name |
|  |  |  |
| Position |  | Position |
|  |  |  |
| Signature |  | Signature |
|  |  |  |
| Date |  | Date |

#### Signature block for organisations with one authorised signatory

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name |  | Witness name |
|  |  |  |
| Position |  |  |
|  |  |  |
| Signature |  | Signature |
|  |  |  |
| Date |  | Date |