



RTH Connect Application Form

Description

• Regional Tech Hub Connect Grant Application Form

The Connect Grants are now closed, and applications are currently being assessed. Event sponsorship applications remain open until funds are exhausted.



• Step 1 of 5

20%

Regional Tech Hub Connect Grant Application Form

Organisation Name*	
First	Last

Organisation Address	
Street Address	Address Line 2
City	State / Province / Region
ZIP / Postal Code	Country
	Australia ▼

Organisation Website

Organisation ABN



Type of Organisation*

- ☐ Not-for-profit
- ☐ Community group
- ☐ Regional service provider
- ☐ Local government
- ☐ Other

Contact Person*

First Last

Contact Email*

Enter Email Confirm Email

Contact Phone*

Please select the grant you are applying for*

- ☐ RTH Connect Grant (up to \$3,000)
- ☐ Event Sponsorship (up to \$1,500)

Project or Event Title*

0 of 50 max characters

Which region(s) will benefit?*

0 of 300 max characters

Brief Description*



0 of 300 max characters

Start Date*

 DD slash MM slash YYYY

End Date*

object of Event Details

1. What is the connectivity issue or opportunity youâ??re addressing?*

0 of 200 max characters

2. What activities will you deliver and how will they help improve connectivity literacy?*

0 of 200 max characters

3. How will you involve local people, partners or organisations?*

0 of 200 max characters

4. How will you promote the Regional Tech Hub through this project or event?*



0 of 200 max characters

Total Amount Requested*

Please enter a number from **0** to **3000**.

Expected Event Attendance

Include the total number of people engaged through your project.

Budget*

Upload a budget outlining the expenses to be covered by this grant. The link to the budget template is below.

Choose a file

Accepted file types: jpg, pdf, xls, doc, Max. file size: 128 MB.

[Click here to download the budget template](#)

If your project costs more than the grant amount, how will the remainder be funded?

0 of 200 max characters

Declaration Acknowledgement*

- ☐ I confirm the information is true and correct
- ☐ I have the authority to submit this application
- ☐ I agree to provide a short report on completion if successful

Name of Person Submitting the Application*

Position*



Save

Date

01/09/2025

Date Created

25/06/2025