

Grants for Scaling Accelerator Programs Application Form

Form Preview

Overview and Eligibility Check

* indicates a required field

OVERVIEW

Please complete this form to submit a grant application to the Innovation Victoria Scaling Accelerator Programs Grant Round. This form has the following five sections that must be completed.

1. Eligibility Check2. Applicant Details3. Project Details4. Responses to Assessment Criteria5. Declaration

In the Declaration, you are required to outline how AI has been used in the preparation of your grant application.

The application must be submitted before the closing date and time, 11:59pm AEDT Monday 9 November 2026. The system will not allow late applications, and emailed applications will not be accepted by Innovation Victoria.

ELIGIBILITY CHECK

Applicants must meet all eligibility requirements listed below, in addition to submitting the application through SmartyGrants by the closing date and time.

This eligibility check ensures you are eligible before moving on to completing the full application.

Important Note: If you select 'No' or 'I'm not sure' for any of the responses below, you are unfortunately ineligible to apply for funding through this grant round. You will be unable to complete this application form.

If your unsure about your eligibility please contact the Innovation Victoria Grants Team before progressing grants@innovationvictoria.com

1. Program Focus

The application must be for an Accelerator (see Definition below) that provides support beyond a pre-accelerator program and focuses on helping established innovative companies who have completed customer validation and moved beyond proof-of-concept.

Definition of an Accelerator: A competitive program supporting established innovation-led companies through mentorship, educational components, and connections to accelerate growth. Programs may be fixed-term and cohort-based or use staged/milestone-based progression that generally culminates in a demo day or investor showcase.

Note: Current Innovation Victoria grant recipients and previous LaunchVic grant recipients who have received funding to deliver the same or similar accelerator program are ineligible for this round. This grant program focuses on increasing the diversity and support available to Victorian companies.

This application is seeking funding for an eligible Accelerator program *

Grants for Scaling Accelerator Programs Application Form

Form Preview

☐ Yes ☐ No ☐ I'm not sure

2. Applicant Experience

Applicants must have a track record and proven expertise in delivering an Accelerator, or a comparable program that supports scaling established companies, with established networks including global connections.

Note: Experience delivering a pre-accelerator program is not considered meeting this criteria.

The applicant is an experienced Accelerator operator *

☐ Yes ☐ No ☐ I'm not sure

3. Funding Request

Applicants should request an amount proportionate to the scale, strategic value and expected outcomes of their proposal. Innovation Victoria is prepared to fund programs of up to AUD \$3 million each, with total funding allocation of up to AUD \$5 million available for this round.

The application is for a grant no greater than AUD \$3 million *

☐ Yes ☐ No

4. Type of Entity

The type of entity leading the application is one of the following.

Note: an entity with an Australian Company Number (ACN) is considered 'registered'.

Individuals or Sole Traders, incorporated trusts, not-for-profits and Universities (as the lead applicant) are ineligible.

The lead applicant is a: *

- ☐ (a) An Australian registered company headquartered in Victoria or has an established office in Victoria
- ☐ (b) An Australian registered company that agrees to establish an office in Victoria
- ☐ (c) An international company that agrees to establish an office in Victoria
- ☐ Other:

Applicant Information

* indicates a required field

Organisation Details

Please provide applicant details including the primary and secondary contact for this grant application.

Type of Organisation *

Grants for Scaling Accelerator Programs Application Form

Form Preview

- ☐ Australian company with an established Victorian office
- ☐ Australian company that agrees to establish an office in Victoria
- ☐ International company that agrees to establish an office in Victoria

Australian Applicant: Company Details

Registered Company Name *

Organisation Name

As listed on ASIC

Trading Name (if different from registered 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.

Do you agree to establish an office in the state of Victoria? *

- ☐ Yes ☐ No ☐ I'm not sure ☐ Other:

International Applicant: Company Details

Registered Company Name *

Organisation Name

Trading Name (if different from registered Name):

Grants for Scaling Accelerator Programs Application Form

Form Preview

Countries of Operation

Note: Please include countries the applicant is currently operating/running programs in outside the headquarters. Please enter each country followed by a comma.

Do you agree to establish an office in the state of Victoria? *

☐ Yes

☐ No

☐ I'm not sure

☐ Other:

Applicant Details

Registered Business Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Victorian Office Address (as applicable)

Address

Website *

Must be a URL.

LinkedIn *

Australian Applicant: Contacts

PRIMARY CONTACT *

First Name

Last Name

Position *

Mobile Number *

Must be an Australian phone number.

Phone Number

Grants for Scaling Accelerator Programs Application Form

Form Preview

Must be an Australian phone number.

Email Address *

Must be an email address.

SECONDARY CONTACT *

First Name

Last Name

Position *

Mobile Number *

Must be an Australian phone number.

Phone Number

Must be an Australian phone number.

Email Address *

Must be an email address.

International Applicant: Contacts

PRIMARY CONTACT *

First Name

Last Name

Position *

Mobile/Cell Number *

Phone Number

Email Address

Must be an email address.

SECONDARY CONTACT *

Grants for Scaling Accelerator Programs Application Form

Form Preview

First Name

Last Name

Position *

Mobile/Cell Number *

Phone Number

Email *

Must be an email address.

Project Details

* indicates a required field

Proposed Project

Please provide a summary of your proposed Accelerator Program. This is also referred to as the 'Project' you are seeking grant funding for from Innovation Victoria.

Project Title *

Must be no more than 250 characters.

Short Project Summary *

Word count:

Must be no more than 100 words.

Provide a short summary of your application, must be no more than 100 words. What is it you are seeking funding for and what will you achieve?

Start Date *

Must be a date.

Successful applications are expected to be announced in February 2027.

End Date *

Must be a date.

Enter the end date of the project that covers the period of requested Innovation Victoria funding.

Grants for Scaling Accelerator Programs Application Form

Form Preview

Amount Requested from Innovation Victoria *

\$

Must be a dollar amount.

Note: Applications requesting more than \$3,000,000 are ineligible. Amount is AUD and exclusive of GST.

Applicant Contribution (cash and/or in-kind)

\$

Must be a dollar amount.

Amount is AUD

Partner Contribution/s (cash and/or in-kind)

\$

Must be a dollar amount.

Amount is AUD

Total Project Cost

This number/amount is calculated.

Responses to Assessment Criteria

* indicates a required field

1. Market Need

Demonstrate the following:

- a clearly defined gap, market failure or unmet need that the proposed Scaling Accelerator Program (the Program) will address.
- how the program differentiates from other similar Accelerator programs in the market.
- demand for the program.

Market Need for proposed Scaling Accelerator Program *

Word count:

Must be no more than 200 words.

Upload Supporting Files (Not Mandatory)

Attach a file:

Upload any relevant supporting evidence, such as market analysis, and participant demand data

2. Capability

Demonstrate the following:

- a **track record and experience** of delivering a high-quality Accelerator, or a comparable program that supports scaling established companies, including (but not limited to) the time in operation, key partnerships, the number of programs/cohorts

Grants for Scaling Accelerator Programs Application Form

Form Preview

delivered, the number of innovative companies supported and the percentage of those companies still in operation.

- **established networks** and commercial partners that can actively support participating companies through referrals, commercial opportunities, technical advice, investment pathways and global market access.
- **program effectiveness** as evidenced by graduates securing partnerships, increasing revenue, exporting to global markets, or capital raised as a result of the completed accelerator program.

Track record and experience *

Word count:

Must be no more than 300 words.

Detail your track record and experience of delivering a high-quality Accelerator, or a comparable program that supports scaling established companies, including (but not limited to) the time in operation, key partnerships, the number of programs/cohorts delivered, the number of innovative companies supported and the percentage of those companies still in operation.

Established networks *

Word count:

Must be no more than 300 words.

Outline your established networks and commercial partners that can actively support participating companies through referrals, commercial opportunities, technical advice, investment pathways and global market access.

Program effectiveness *

Word count:

Must be no more than 300 words.

Detail how effective your program is as evidenced by graduates securing partnerships, increasing revenue, exporting to global markets, or capital raised as a result of the completed accelerator program.

Program effectiveness: upload 5 Case Studies (1 page per graduate company) as one combined file

Attach a file:

A maximum of 1 file may be attached.

Key Personnel

Grants for Scaling Accelerator Programs Application Form

Form Preview

Outline the capability and relevant experience of key personnel, including the program facilitators, mentors and commercial experts who will deliver the proposed Scaling Accelerator program and the key person (Project Manager) who will oversee the funded program (if known).

Provide a list of Key Personnel who will have a direct role in delivering and managing the proposed Scaling Accelerator Program in the table below.

*

Word count:

Must be no more than 200 words.

Please list the Key Personnel, including Project Manager, in the Table below.

Name	Organisation	Position	Role in Project	LinkedIn

3. Accelerator Overview and Outcomes

Outline the following:

- the **proposed Scaling Accelerator program**, including (but not limited to):
 - sector focus (if applicable)
 - delivery model (cohort based, staged etc.)
 - delivery format (in-person, hybrid, online)
 - length of program and contact hours
 - program course content (including topics/curriculum)
 - recruitment process and type of participants recruited (e.g., company stage)
 - accelerator events (e.g., demo days/investor events)
 - equity model (if applicable)
- a summary of the expected **participant benefits**, including (but not limited to):
 - founder/leadership capability outcomes
 - business outcomes
 - type of connections facilitated
 - amount of investment provided

Accelerator Overview and Outcomes: upload up to a 5 page document *

Attach a file:

Grants for Scaling Accelerator Programs Application Form

Form Preview

A maximum of 1 file may be attached.

4. Key Performance Indicators (KPIs) and Impact

Outline the following:

- the number of years the proposed Scaling Accelerator program will operate for under the grant funding.
- the number of cohorts or number of staged programming periods to be delivered.
- the total number of companies to be supported (graduated) through the proposed Scaling Accelerator program, including the number of Victorian companies.
- any other activities that support the Victorian innovation ecosystem.

Note: The type of companies to be supported through the funded program include the following.

Established company: An entity who has completed customer validation and moved beyond proof-of-concept with a registered Australian Business Number (ABN) or similar, an active website and at least one founder working full-time on the business.
Victorian company: An innovative established company with at least 50% of its founders and team located in Victoria.

*

Word count:
Must be no more than 200 words.

Summary of Number of Companies Supported

Note: If you are approved for funding by Innovation Victoria, the below figures will be referred to when contracting KPI metrics and Milestone payment requirements in your Grant Agreement.

Cohort	Estimated Program Start Date	Estimated Program End Date	Total # Graduated Companies	Total # Victorian Graduate Companies
e.g., Cohort 1	e.g., Jun 2027	e.g., Oct 2027	Expected Minimum Number	Expected Minimum Number

Timeline

Grants for Scaling Accelerator Programs Application Form

Form Preview

Provide a basic timeline of program delivery that includes recruitment and program delivery phases, graduation points, and event delivery (as applicable).

Upload Timeline *

Attach a file:

A maximum of 1 file may be attached.

5. Funding and Budget (Value for Money)

The funding amount request and any applicant and/or partner contributions should match the amounts included on the Project Details page.

Funding amount requested from Innovation Victoria *

\$
Must be a dollar amount.

Total program cost *

\$
Must be a dollar amount.

Estimated cost per participating company *

\$
Must be a dollar amount.

Applicant Contribution (cash and/or in-kind)

\$
Must be a dollar amount.

Partner Contribution/s (cash and/or in-kind)

\$
Must be a dollar amount.

Upload Partner support letters (if applicable)

Attach a file:

Letters of support that commit funding must be provided in order for the funding to be considered.

Please disclose any other government funding applied for or received for this proposed Scaling Accelerator program

If no other government funding has been applied for or received please leave blank

Budget

The application outlines a reasonable budget for the requested Innovation Victoria grant funding for Operational costs. **Operating costs:** includes staff salaries, rent, event costs, insurance, accounting and legal costs, marketing and promotion costs, reasonable travel costs, grants to participating companies and other reasonable operating costs.

Grants for Scaling Accelerator Programs Application Form

Form Preview

- **Expenditure Description (Column 1):** Outline how the grant funding will be used. Each line item must relate to eligible expenditure, defined as Operating costs directly associated with delivering the Project.
- **Expenditure Amount (Column 2):** Specify the anticipated amount of funding allocated to each line item for the duration of the grant.

Ensure that the total of all line items equals the total amount requested from Innovation Victoria.

Expenditure is excluding GST and in AUD.

Expenditure Description	\$ Expenditure Amount
	\$
	\$
	\$
	\$
	\$
	\$

Budget Totals

Total Expenditure Amount

This number/amount is calculated.

Need for funding

Demonstrate the following:

- why Innovation Victoria funding is required.
- how the proposed funding model leverages applicant, partner, and other resources alongside the Innovation Victoria grant funding.

*

Word count:

Must be no more than 150 words.

6. Financial Sustainability

Demonstrate and outline the following

- a credible pathway for the Scaling Accelerator program to become financially sustainable beyond the term of the Innovation Victoria grant funding in Victoria.
- the full annual Operating costs for the proposed Scaling Accelerator program (the total income required to sustain the program on an ongoing basis).

Grants for Scaling Accelerator Programs Application Form

Form Preview

*

Word count:

Must be no more than 200 words.

Upload Financial Projections *

Attach a file:

Upload financial projections that substantiate the financial sustainability of the Scaling Accelerator program in Victoria.

Declaration

* indicates a required field

Use of AI technology

To help us understand technology used by grant applicants, could you please let us know if you used AI in the preparation of your application, and if yes, in which section? *

Applicant Declaration

- I declare that I have read and understood the Innovation Victoria *Grants for Scaling Accelerator Programs* Grant Guidelines.
- I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, true, accurate and complete.
- I understand that I may be requested to provide further clarification or documentation to verify the information supplied in this form and that Innovation Victoria, during the application process, may engage with external advisers to advise on information provided in the application.
- I understand that submitting this application does not guarantee success. I understand this application will be assessed by Innovation Victoria, with funding approval determined by the Innovation Victoria Executive and their decision is final.
- If the application is successful, I agree to enter into a legal contract (Grant Agreement) with Innovation Victoria and provide project reporting and/or evidence of project progress to receive payments under agreed milestones.
-

Grants for Scaling Accelerator Programs Application Form

Form Preview

I approve of the information in this application being communicated to Innovation Victoria may be provided to the Department of Jobs, Skills, Industry and Regions (DJSIR) within the Victorian State Government in electronic form.

- I declare that I am authorised to complete this form and to sign and submit this declaration on behalf of the applicant.

By including my name in this application it is deemed to be my signature for the purpose of this application.

First Name *	
Last Name *	
Position *	
Company *	
Date *	 Must be a date.