NSW Local Landcare Coordinators Initiative

Part 2: Six Monthly Update – May 2018 to December 2018

Introduction

This component of the regular reporting under the Local Landcare Coordinator Initiative is to provide an update on information and progress under the initiative specifically for the host organisation.

It provides important updates on contact details and an opportunity to review the progress being made and the challenges being faced. NB: *We are currently using this information to demonstrate to government what has been achieved with their investment and to secure further funding beyond 2019. It is also an opportunity to improve the program.*

Host Organisation Details

|  |  |
| --- | --- |
| Name of Host Organisation: | enter text |
| Network Affiliation (if any): | enter text |
| Key Contact Name (not coordinator): | enter text |
| Key Contact Number (not coordinator): | enter text |
| Key Contact Email (not coordinator): | enter text |
| Total EFT provided under LLCI: | enter text |

Local Coordinator Details

|  |  |
| --- | --- |
| Name of Coordinator: | enter text |
| Work Location (most common location): | enter text |
| Contact Number: | enter text |
| Contact Email: | enter text |
| EFT under LLCI Program: | enter text |
| Normal weekly hours under LLCI: | enter text |

|  |  |
| --- | --- |
| Name of Coordinator: | enter text |
| Work Location (most common location): | enter text |
| Contact Number: | enter text |
| Contact Email: | enter text |
| EFT under LLCI Program: | enter text |
| Normal weekly hours under LLCI: | enter text |

(If more than two Local Coordinators funded under LLCI please use additional tables at end of document)

Any Changes to Local Coordinator since May 2018

|  |
| --- |
| Click here to enter text. |

Attendance at Regional Community of Practice Events

List any formal regional community of practice events as facilitated by your regional network, Regional Landcare Facilitator or other, which your Local Coordinator has attended?

|  |  |  |
| --- | --- | --- |
| Date | Location | Description of event or meeting |
| date | enter text | enter text |
| date | enter text | enter text |
| date | enter text | enter text |
| date | enter text | enter text |
| date | enter text | enter text |
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| date | enter text | enter text |
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| date | enter text | enter text |
| date | enter text | enter text |
| date | enter text | enter text |
| date | enter text | enter text |
| date | enter text | enter text |
| others |

Benefits of Regional Community of Practice Events

What has been the main benefit in attending a regional event in the last 6 months?

|  |  |  |
| --- | --- | --- |
| Benefit | Yes or No | If Yes how if No why |
| Improved connectivity to your region | enter text | enter text |
| Improved connectivity to the state level | enter text | enter text |
| Improved communication generally | enter text | enter text |
| Has your use of Gateway increased? | enter text | enter text |
| A new awareness of a particular issue? | enter text | enter text |
| Improved governance within your group? | enter text | enter text |
| Other: |

Benefits to your organisation from hosting a Local Landcare Coordinator

What are some of the highlights your organisation or community has experienced over the last 6 months from hosting a Local Landcare Coordinator under the LLCI program?

|  |
| --- |
| enter text |

Your Partners

Since the beginning of LLCI (or in the last 6 months), have you partnered on project applications? If so, how many projects and how many partners (successful or otherwise). Who are the main partners that your organization has collaborated with?

|  |
| --- |
| enter text |

Submitted by

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name**: | enter text | **Position**: | enter text | **Date**: | date |

Additional Local Coordinator Details (if required)

|  |  |
| --- | --- |
| Name of Coordinator: | enter text |
| Work Location (most common location): | enter text |
| Contact Number: | enter text |
| Contact Email: | enter text |
| EFT under LLCI Program: | enter text |
| Normal weekly hours under LLCI: | enter text |

|  |  |
| --- | --- |
| Name of Coordinator: | enter text |
| Work Location (most common location): | enter text |
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|  |  |
| --- | --- |
| Name of Coordinator: | enter text |
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| Contact Number: | enter text |
| Contact Email: | enter text |
| EFT under LLCI Program: | enter text |
| Normal weekly hours under LLCI: | enter text |

Submitting This Report

Once complete this report is to be submitted through the Local Landcare Coordinator Initiative Reporting page on the NSW Landcare Gateway: www.landcare.nsw.gov.au

By submitting this report you are stating that all information contained is true and accurate and that your organisation is making every effort to meet the requirements of the Local Landcare Coordinator Initiative Host Funding Agreement held with Local Land Services.

Contacts or Help

If you require any assistance or have any questions about this report please feel free to contact:

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Natasha English

NSW State Landcare Coordinator
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