Illawarra Region Innovation and Investment Fund

FTE Update Report

FTE update as at the:

☐ **First Year Anniversary**

☐ **Second Year Anniversary**

☐ **31 January 2016**

Grantee: _____

Project Title: _____

IRIIF No: _____   Additional FTE Commitment: _____

Project Start Date: _____   Project End Date: _____

Part A - Full Time Equivalent (FTE) Jobs

Please provide a summary of the full time equivalent jobs created at the project site following project completion.

FTE Jobs Commitment (Schedule 1)

FTE Jobs Sustained : 1st Anniversary	x/ref	Totals
FTE jobs existing at commencement of project	(a)	
Additional FTE Jobs created by completion of project	(b)	
FTE Jobs existing at project completion (baseline)	(a+b=c)	
FTE Jobs as at 1st anniversary of project completion	(d)	
FTE Jobs gained / lost	**(c-d)**	

FTE Jobs Sustained : 2nd Anniversary (if applicable)	x/ref	Totals
FTE Jobs existing at 1st Anniversary of project completion	(d)	
FTE Jobs as at 2nd anniversary of project completion	(e)	
FTE Jobs gained / lost	**(d-e)**	

FTE Jobs Sustained at 31 January 2016	x/ref	Totals
FTE Jobs existing at 2nd Anniversary of project completion	(e)	
FTE Jobs as at 31 January 2016	(f)	
FTE Jobs gained / lost	**(e-f)**	

Comment on FTE achievement and provide a detailed explanation where FTE commitment has not yet been reached and where FTE jobs have been lost.

Add Comment :

Part B – Supporting Documentation

I attach the following documentation to support the above claims:

☐Auditors Report at project Completion

☐Salary Expenditure

☐Other *(please list)*

_____

_____

_____

Part C – Post Project Activities

Please provide details of any major achievements since previous report

Add Details :

Part C - Declaration

I declare that the information submitted in this FTE Update report is, to the best of my knowledge, true and complete and that the calculation of FTE jobs has been conducted according to Clause 1 of the IRIIF Funding Agreement.

Signature: …………………………………………………………………………………………

Name (please print): ...………………………………………………………………………………

Title: …………………………………………………………………………………………..

Date: ……………………………………………………………………………………………

The declaration must be signed by the Grantee Representative stated in the Funding Agreement

(e.g. Managing Director)

Submitting this report

Please submit the completed report and supporting documentation to the IRIIF Program Manager:

by email : IRIIF@innovation.gov.au

by Post: AusIndustry, IRIIF Program Manager, GPO Box 9839, Sydney NSW 2001

Need Help?

If you have any questions about completing this report, please contact your Customer Service Manager.