

HIGH SCHOOL HELP APPLICATION FORM



This form is to be completed by Evolve Housing tenants. Please complete and send the form to **Evolve Housing, PO W124 Parramatta Westfield NSW 2150** or email to **myevolve@evolvehousing.com.au** . For information or assistance, please contact 1800myevolve (1800 693 865) 9am - 5pm, Monday to Friday.

The **High School Help Program** is for high school students is an Evolve Support Program for Evolve Housing residents. This grant is available to residents in years 7 to 11. Please refer to the **High School Help Program** Factsheet for more information.

SECTION A: RESIDENT AND APPLICANT DETAILS			
Students must be a declared household member			
First name		Last name	
Address		Postcode	
Phone		Email	
How would you like to be contacted?		<input type="checkbox"/> Email	<input type="checkbox"/> Post <input type="checkbox"/> Phone

STUDENT INFORMATION			
Name		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
School year in 2018		Date of birth	DD/MM/YYYY
Is the student a permanent resident or Australian Citizen?			
Briefly describe how this grant would assist you in your studies education (to be completed with the student)			
What are some of the issues faced by your family situation apart from income?			
Long term illness*		Overcrowding	
Medical costs		Disability*	
Other			

SECTION B: FINANCIAL COMPONENT OF GRANT

If you are successful in obtaining a grant, how will the funds assist you in your education?

Course/subject fees	Textbooks, workbooks	Home computer	Furniture
Camps/excursion	Computer software	Internet access	School uniform
Specialist equipment	Other		

How will the items you have indicated (above) assist you in your education?

Do you understand that successful applicants must agree to a reporting process twice a year that includes progress report from the student’s school and S4S Coaching?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you understand and agree that ongoing tutoring with S4S is part of the grant and cannot be excluded or exchanged for other support?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you be willing to partake in future surveys or research we may conduct to help us measure how effective this program is?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

All applications must be endorsed and include a letter of support from the School Principal.

SECTION C: SCHOOL ENDORSEMENT

This section must be completed by your Principal from the school you are attending. The student’s school will be the fund holder for the grant and will administer the funds on behalf of the student.

If the student is successful in receiving this grant how will the financial support and tutoring support assist this student to improve their educational outcomes

If the applicant is successful in obtaining the grant, the school agrees to administer the funds on behalf of and in consultation with the student. The school will ensure a plan is developed for expenditure of funds. The grant funds plan must be developed in partnership with the student, and in consultation with the student’s parent/ guardian.

DECLARATION

Name		Signature	
School		Date	
Phone		Email	
To help us to measure how effective this program is, would you be willing to share your story (experience in this program) or partake in future surveys?			<input type="checkbox"/> Yes <input type="checkbox"/> No

CHECKLIST

<input type="checkbox"/>	Completed application form	<input type="checkbox"/>	Previous Year school report
<input type="checkbox"/>	Relevant Medical reports (if applicable)	<input type="checkbox"/>	School endorsement completed
<input type="checkbox"/>	Letter from school principal	<input type="checkbox"/>	Letter from school principal
<input type="checkbox"/>	Copy of birth certificate and or permanent residency documents		

SECTION D: APPLICANT DECLARATION

This section must be completed by the parent or guardian of the student applying for the grant.

- If successful in obtaining a grant, the applicant agrees to work closely with their school in development of an individual education plan.
- If successful in obtaining a grant, the applicant and parent / guardian agrees to sign an agreement with the Tutoring school .
- If successful in obtaining a grant, the applicant and parent / guardian agrees to participate in the evaluation process twice a year.

All the supporting documents required must be provided at the time of the application. By signing this application the applicant and parent/guardian if approved agrees to partake in regular assessment process and gives consent for use of personal images and videos.

I certify that all the information provided by me in this application is true and correct and understand the requirements of successfully obtaining a grant.

Signature		Date	DD/MM/YYYY
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All information on the application is strictly confidential and you may be notified to attend an interview to discuss your application. Please feel free to contact us to clarify any information.

PRIVACY STATEMENT

Evolve Housing is committed to respecting and protecting the privacy and rights of individuals in relation to their personal information. Our Privacy Policy outlines how we collect, use, store, and disclose information in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). Please refer to our Privacy Policy on the Evolve Housing website if you would like more detailed information. You may also request a copy of the Privacy Policy from any Evolve Housing employee.

OFFICE USE ONLY			
Approval	Year 1	Year 2	Year 3
Assessed by	Yes <input type="checkbox"/> Y No <input type="checkbox"/> N	Yes <input type="checkbox"/> Y No <input type="checkbox"/> N	Yes <input type="checkbox"/> Y No <input type="checkbox"/> N
Name			
Signature			
Date			
Name			
Signature			
Date	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY