

GO! GRANT APPLICATION



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.

GO! Grants are for Evolve Housing residents. This grant is available to residents aged 18 years or younger who are active in sport, scouts or cultural activities. Please refer to the GO! Grants Factsheet for more information.

SECTION A: RESIDENT AND APPLICANT DETAILS

Applicant must be a declared household member (individual applications must be completed for each applicant, and if approved, funds will be allocated per household). Total grant per household is \$700 over 2 years up to \$350 per year in financial support.

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

APPLICANT INFORMATION

Name		Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Activity/sport		Date of birth	DD/MM/YYYY	
Name of sport/activity organisation				

SECTION B – ITEMS REQUIRED

This should be completed in collaboration with coach, instructor or leader of activity the child is involved with:

1	4	7
2	5	8
3	6	9
Other		

Briefly explain how GO! Grants will assist you?

SECTION C – ACTIVITY / ORGANISATION ENDORSEMENT

This section must be completed by coach, instructor or leader of activity you are applying the grant for

If the applicant is successful in receiving this grant how will the financial support assist this child

Name		Signature	
Activity		Position	
Phone		Email	

CHECKLIST

<input type="checkbox"/> Completed application form	<input type="checkbox"/> Proof of registration
<input type="checkbox"/> Relevant endorsement from coach/instructor	<input type="checkbox"/> Quotes/invoices/receipts for items required
<input type="checkbox"/> Copy of birth certificate and or permanent residency documents	

NOTE

- We do not give any funds directly to applicants.
- We will pay directly to relevant suppliers/sport, cultural and physical activity institutions for items required, but you must provide a copy of relevant invoice or quotation from them with their business name and ABN printed on the invoices.
- We can reimburse applicants for relevant items already purchased, but a copy of an itemised receipt must be provided.

SECTION D: APPLICANT DECLARATION

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

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?

Yes

No

If successful in obtaining a grant, the applicant agrees to participate in the annual evaluation process.

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.

All information on the application is strictly confidential and you will be notified in writing on the outcome of your application. Please feel free to contact us to clarify any information.

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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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		Approval Year 2	
Assessed by	<input type="checkbox"/> Yes <input type="checkbox"/> No	Assessed by	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name		Name	
Signature		Signature	
Date	DD/MM/YYYY	Date	DD/MM/YYYY
Name		Name	
Signature		Signature	
Date	DD/MM/YYYY	Date	DD/MM/YYYY