

SECTION A: RESIDENT AND APPLICANT DETAILS Applicant must be a declared household member.							
First name		Last name					
Address		Suburb			Postcode		
Phone		Email					
How would you like to be contacted?	Email		Post		Phone		

SECTION B: APPLICANT AND COURSE INFORMATION								
First name	Last n	Last name:						
Course:	Date o	of birth: DD/MM/Y	YYY	Gender: Male / Female				
Name of sport/activity organisation								
Briefly describe how this grant would assist you in your studies (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 (please specify)								
SECTION C: FINANCIAL COMPONENT OF GRANT								
Please list the educational items you need.								
Item	Estima	Estimate Cost						
SECTION D: CHECKLIST								
Yes Completed application form								
Yes Proof of course enrolement								
SECTION E: DECLARATION								
This section must be completed by the parent or guardian if the applicant is under 18 years old. I agree to take part in an assessment survey with Evolve Housing staff for them to understand the success of the KEY Grant program.								
Please tick ✓ a box to indicate this is understood: Yes								
I certify that all the information provided by me in this application is true and correct and I understand the requirements of successfully obtaining a grant. Please tick a box to indicate this is understood: Yes								
PRINT FULL NAME			DATE					

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