

YOUTH DEVELOPMENT GRANT



PLEASE ENSURE THAT YOU HAVE READ A COPY OF THE GUIDELINES BEFORE COMPLETING THIS APPLICATION

Youth Development Grants are offered at a set amount of \$250 and are available to support high achievement in a cultural, academic or sporting activity that requires attendance at a State, National or International level event.

Has the event occurred already?

Yes No

Have you received a Leeton Shire Council Youth Development Grant this financial year? Yes No

If you ticked no for both of these questions, please proceed. If you ticked yes for either questions your application is NOT eligible.

INDIVIDUAL APPLICANT DETAILS

| | |
|-------------------|--|
| Name of Applicant | |
| Postal Address: | |
| Email: | |
| Phone: | |

EVENT/ACTIVITY

Title: *(Name of the event/activity for which the grant is sought)*

Event/Activity Summary: *(Describe the event or activity for which you seek support)*

Describe the achievements that have made you eligible for this event/activity:

What date/s will the activity/event occur:

SUPPORTING EVIDENCE

You must provide at least one piece of evidence such as an invitation, letter or program.

Please list evidence below.

1. _____
2. _____

Please provide one reference to be contacted regarding your application, eg sporting club, teacher, coach (it cannot be a parent/guardian):

Contact Name:

Contact Number:

OTHER SUPPORT

Please provide a detailed breakdown of your anticipated expenditure and income, indicating the item of expenditure and what the grant will be used for – please include all support from other organisations such as school or sporting club.

Anticipated expenses

| | |
|----------------------|----|
| Travel: | \$ |
| Accommodation: | \$ |
| Living expenses: | \$ |
| Other (please list): | \$ |
| Total expenditure: | \$ |

Anticipated income

| | |
|----------------------------------|----|
| Funding from third parties: | \$ |
| Personal financial contribution: | \$ |
| Other (please list): | \$ |
| Total income: | \$ |

CERTIFICATION

I, the applicant, certify that all details supplied in this application form and in any attached documents are true and correct to the best of my knowledge. I have read the accompanying Guidelines and Application Instructions provided with this application form. I am aware that, if successful, I may be invited to attend a Council Meeting or Workshop to speak about the activity/event I attended.

| | |
|------------|--|
| Name: | |
| Date: | |
| Signature: | |

SUBMITTING YOUR APPLICATION

Complete the checklist below before you submit your application using one of these methods:

By email

Email an electronic copy of your application form and electronic copies of all supporting material to council@leeton.nsw.gov.au

By mail

Post one printed copy of your application form and copies of your supporting material to:

Community Services Team
Leeton Shire Council
23-25 Chelmsford Place
LEETON NSW 2705

In person

Deliver one printed copy of your application form and copies of your supporting material to Customer Service between 9am and 5pm, Monday to Friday:

Leeton Shire Council
23-25 Chelmsford Place
LEETON NSW 2705

CHECKLIST

To ensure your application is considered, it is essential that you complete all sections of this application form and provide all supporting documentation as requested.

Required supporting material

- Letter, invitation or program which provides evidence of your required attendance
- Reference from relevant coach, tutor, etc

Please ensure you have ticked all of the below prior to submitting:

- I have read the guidelines and application form.
- The project satisfies the grant criteria.
- I have not received a Youth Development Grant within the current financial year.
- I have completed every question in the application form.
- I have proof read my application and kept a copy for myself.
- I have included evidence of my attendance being required