

YAS Application Form 2024

Form Preview

Eligibility

* indicates a required field

Confirmation of Eligibility

Eligibility criteria is listed below and in the Young Achiever Scheme Guidelines available on the website.

Applicants that are considered ineligible will not be considered for assessment.

If you are unsure if you meet the eligibility criteria, please contact the Youth Officer on **(02) 6022 9300** or email : **youth@wodonga.vic.gov.au**.

Eligibility criteria

In order for this application to be considered applicants/participants must meet **ALL** of the following criteria.

(* Indicates a required field)

The Young Achiever Scheme Grant Guidelines have been read *

☐ Yes ☐ No

The application is for a young person aged 24 or younger *

☐ Yes ☐ No

You are NOT eligible for the Young Achiever Scheme if you are 25 or older.

The applicant is a young person who lives in the City of Wodonga *

☐ Yes ☐ No

If you are NOT able to provide proof of your residency you are ineligible for the Young Achiever Scheme Grants

Is the applicant able to provide proof of participation at a local, state, national or international level? *

☐ Yes ☐ No

If NO, unfortunately you are ineligible for the Young Achiever Scheme

Will the participant be paid for their involvement in the event/activity? *

☐ Yes ☐ No

If YES, unfortunately you are ineligible for the Young Achiever Scheme Grants.

I agree that the applicant/participant or proxy MUST attend the nominated Council meeting before funding can be release into the nominated back account *

☐ Yes ☐ No

If NO, unfortunately you are ineligible to receive Young Achiever Scheme Grant funding.

Wodonga Council 104 Hovell St, Wodonga VIC, 3690 Ph: (02) 6022 9300 Email general enquiries: info@wodonga.vic.gov.au

Contact Details

* indicates a required field

Privacy Notice

Personal and or health information collected by the council is used for municipal purposes as specified in the Local Government Act 1989. The personal and or health health information will be used solely by the council for these purposes and or directly related purposes. The council may disclose this information to others if required by legislation. The applicant understands that the personal and or health information provided is for the above purpose and that he or she may apply to council for access to and/or amendment of the information. Request for access and or correction should be made to the council's privacy officer.

Contact Details

Note: Throughout this form, the term applicant refers to the person filling out the form while participant refers to the young person for whom this application is for.

Name of Applicant (or parent/guardian if under 18) *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

If the person participating in the event is under the age of 18, the parent/gardian must be listed as the applicant

Participant's Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Young person who the application is for

Participant Date of Birth *

DD/MM/YYYY

Participant's Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Phone Number *

Must be an Australian phone number.

Email Address *

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Must be an email address.

Preferred Method of Contact *

☐ Phone ☐ Email ☐ Post

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Event/Activity Details

* indicates a required field

The purpose of the Young Achiever Scheme grants

Through its Young Achiever Scheme (YAS), Wodonga Council recognises and supports young people (24 years and under) who display an outstanding commitment to and/or achievement in their chosen endeavour.

The scheme provides financial assistance to young people to participate, develop skills, compete, perform or represent Wodonga in their chosen endeavour at a state, national or international level. Individuals or groups are eligible to apply.

Please select the grant category you are applying for: *

- ☐ Cultural
- ☐ Sport and recreation
- ☐ Community leadership
- ☐ Education and training
- ☐ Arts, performance, music and dance
- ☐ Agriculture, environmental and sustainability

Please indicate the level for which the participant will be representing Wodonga:

*

☐ Local ☐ State ☐ National ☐ International

What is the name of the event/activity? *

Where is the event/activity being held? *

Who are the organisers of the event/activity? *

Event/activity start date: *

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Must be a date.

Event/activity end date: *

Must be a date.

How long has the participant been involved in this type of event/activity? *

What does the participant hope to achieve by participating in the event/activity? *

Has the applicant or participant applied for the Young Achiever Scheme previously? *

☐ Yes ☐ No

If yes, when did the applicant/participant receive their previous grant?

Must be a date.

If yes, how much did they receive?

\$

Must be a dollar amount.

Has the applicant or participant applied for funding from anywhere else? *

☐ Yes ☐ No

This can include sponsorships or donations etc. from a group or organisation.

If yes, from whom?

If yes, how much?

\$

Must be a dollar amount.

If the applicant has received individual commercial sponsorship of \$1000 or more, you are ineligible for a Young Achiever Scheme Grant. Refer to Guidelines at the top of the page.

Has the applicant or participant done any fundraising to support the participant in this event/activity? *

☐ Yes ☐ No

This can include fundraising organised by a sports club etc.

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Financial Details

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Is the participant currently studying? *

☐ School ☐ TAFE ☐ University ☐ Not studying

Is the participant currently working? *

☐ Full-time work ☐ Part-time work ☐ Apprenticeship
Other

Bank Details

If this application is successful, funds will be transferred to the nominated bank account details requested below.

Name of Bank: *

Bank Account Details *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

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Event/Activity Details

* indicates a required field

Details of Cost

Please list the costs associated with each item.

What is the participants unisex jumper size? *

☐ XS ☐ S ☐ M ☐ L ☐ XL

Participants representing Wodonga at a National and International level receive a jumper as part of their award. This will help with correct allocation of sizing.

Any other costs associated with the participation in the event/activity?

Please list costs associated with items such as competition registration fees, travel insurance etc.

Estimated total Cost

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\$

Must be a dollar amount.

What is the estimated total cost of participating in this event.?

Please provide a brief history of the participant's involvement in their chosen event/activity *

History may include time dedicated to event/activity, achievements, notable experiences, etc.

Please include any additional information which may support your application

Additional information may include financial hardship, living arrangements etc.

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Document Upload

* indicates a required field

Please upload the following essential documents in order to process your application:

Evidence that participant lives within the City of Wodonga: *

Attach a file:

Invitation to participate letter: *

Attach a file:

Participant's Proof of Identity: *

Attach a file:

Written reference 1: *

Attach a file:

Written reference 2: *

Attach a file:

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Please upload a high resolution JPEG image/s of the applicant participating in their event/activity.

Attach a file:

The image will be used across council's publicity channels, including Facebook, Instagram, council's website and our fortnightly e-newsletter, CityLife.

Photo 2

Attach a file:

The image will be used across council's publicity channels, including Facebook, Instagram, council's website and our fortnightly e-newsletter, CityLife.

Photo 3

Attach a file:

The image will be used across council's publicity channels, including Facebook, Instagram, council's website and our fortnightly e-newsletter, CityLife.

Certification and Feedback

*** indicates a required field**

Certification

This section **MUST** be completed by the participant or the participant's parent/guardian if the participant is under 18.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I agree that I have read and will abide by the conditions of the program. I agree: *

☐ Yes ☐ No

If NO, unfortunately this application is ineligible for consideration.

Name of authorised person: *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name of parent/guardian completing this section

Relation to applicant (if under 18):

Date completed: *

Must be a date.

The date parent/guardian completed this section

Application Feedback

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You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few extra moments to provide some feedback.

Please indicate how you found the online application process: *

☐ Very easy ☐ Easy ☐ Difficult ☐ Very difficult

If you found it very difficult/difficult to complete, could you please be specific with which questions/section:

How long did it take you to complete this application

General Feedback

Do you have any suggestions of what you would like to see happening for Youth in Wodonga? Please provide specific details.