



## Indigenous Youth Leadership and grant program application form

This application form can be used to apply for anyone of the 3 areas listed below Please tick which area you are applying for:

**Individual young people**

**Youth Development**

**Arts**

### 1. Applicant Details

Name of Applicant/Resident \_\_\_\_\_

*(Please provide the name of the person for whom funds are being sought)*

Address \_\_\_\_\_

Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

Is this your home address? Yes No

*(People who don't qualify under the GCA are not eligible to apply. Please view the criteria on the [www.greatrust.com.au](http://www.greatrust.com.au)). Or ring 0428737645.*

Contact Person \_\_\_\_\_ Day Time Telephone \_\_\_\_\_

Email: \_\_\_\_\_ Mobile. \_\_\_\_\_

### 2. Activity Details *(What type of activity are you participating in?)*

\_\_\_\_\_

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Date of competition from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to: \_\_\_\_/\_\_\_\_/\_\_\_\_

Location of competition: \_\_\_\_\_

**3. What will ADBT's grant funds contribute to?** *(What will the grant funds be spent on (e.g. equipment, fares, accommodation, uniforms, registration etc)?)*

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**3a. Please provide quotes, an invoice and/or the details of the provider of the goods or services for payment**

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**3b. Please demonstrate that you have made an effort to contribute to or raise funds for your activities.** Please provide details of your contribution below.

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**4. Electronic Funds Transfer - All ADBT Grants are paid via credit card or EFT**

Electronic Funds Transfer (EFT) are paid directly to the provider of the goods and/or services. **ADBT will not provide the funds to the individual or groups bank account or in cash.** Grant funds will be automatically deposited or paid to the appropriate provider. A remittance advice confirming the details of the EFT/credit card payment will be forwarded by email.

Email Address for remittance to be sent:

**5. Conditions of the Grant**

I confirm and agree to the following:

1. To provide a selection letter/document from the body organising the competition that clearly states the name of the applicant seeking ADBT's grant that verifies their participation in the competition
2. The information given in this application, including any attachments hereto is true and correct in every particular.
3. That monies received from ADBT will be expended as outlined in this application, unless otherwise negotiated.

4. Any monies not expended in accordance with ADBT's approval letter will be returned to ADBT.
5. To acknowledge ADBT's funding of the activity in any publicity or promotion
6. That should this application be successful but the applicant is unable to compete in the competition, I am obliged to ensure that the money is returned in full to ADBT.

Failure to comply with these conditions may preclude accessing further grant funds in the future.

I understand that any variation from the above conditions will require negotiation with ADBT's General Manager.

**Name:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent or Caregiver's Signature:** \_\_\_\_\_

*(If applicant is under 18 years of age)*

Completed applications can be submitted by emailing them to [gm@greatrust.com.au](mailto:gm@greatrust.com.au)