

SPORT, HEALTH, EXERCISE & WELLBEING PROGRAM APPLICATION FORM

Section A – Applicant Details

PLEASE MAKE SURE YOU PRINT CLEARLY IN CAPITALS

Title: Mr Mrs Ms Miss

Head Tenant **Surname:**

Head Tenant **Given Names:**

Street Address:
Postcode:

Postal Address:
(if different to above) **Postcode:**

Email:

Telephone: **Home:** **Mobile:**

	Childs Full Name	Birth Date	Age	Gender
1.	<input style="width: 100%;" type="text"/>	____/____/____	<input style="width: 50px;" type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>
2.	<input style="width: 100%;" type="text"/>	____/____/____	<input style="width: 50px;" type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>
3.	<input style="width: 100%;" type="text"/>	____/____/____	<input style="width: 50px;" type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>
4.	<input style="width: 100%;" type="text"/>	____/____/____	<input style="width: 50px;" type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>

Please provide details of the activity and/or club your child will be participating in

	Club Name	Club / Organisation Address	Activity e.g. footy, gymnastics
Child 1.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Child 2.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Child 3.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Child 4.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Section B – Applicant Details (continued)

Are you an Australian citizen or permanent resident? Yes No

Do you give Pacific Link and your parent/guardian permission to contact each other about your application? Yes No Not Applicable

Your Connection to Community Housing.

Please provide the details of the person who is the main tenant in your household.

Title: Mr Mrs Ms Miss

Surname: Given Names:

Telephone: Home / Work: Mobile:

Mobile:

If you are unsure of these details, please contact the office on 4324 7617 or 1300 654 973 toll free for further advice.

Section B – Additional Information

Note: this information will help us better understand your reasons for applying for the SHEW Program

Name of Applicant:

Are you a person:

- of Aboriginal or Torres Strait Islander origin?
 No Yes, Aboriginal Yes, Torres Strait Islander

- from a language background other than English?
 No Yes, please specify

- with a disability?
 No Yes, please specify

- with special conditions at home? (e.g. Caring for children or living away from home)
 No Yes, please specify

How did you find out about the SHEW Program?

Internet PLH Tenant Newsletter Other, please specify

SECTION C – Applicants Statement

Why do you want the SHEW Funds?

How will you use it to improve your health and wellbeing?

Are there any other special circumstances that you haven't mentioned?

Section D – Applicant Declaration

Note: this section must be completed by the applicant or a parent or guardian if applicant is under 16 years.

Full Name of Applicant:

Provision of Personal Information

I certify that the personal information provided in this application is correct

 Yes No

I am over the age of 16 years (if you tick 'no' your parent/guardian must sign this form)

 Yes No

Provision of Personal Information to Administer and disburse the funds

I give permission for Pacific Link Housing to collect use and disclose my personal information in this application form only for the purposes of assessment and administration of the SHEW Program 2012. Without this permission, it will not be possible to award the Funds.

 Yes No

Release of details for Publicity

There may be situations where your personal details cannot be released to the public. Consent to publicity and/or public release of personal details in the media is voluntary and will not affect the assessment of applications.

If I am awarded the SHEW Program funds, I give permission for Pacific Link to use and release my *first name* (**second name only with written consent**) and a description of the Program Yes No along with my success story for publicity purposes.

If I win the SHEW Program funds, I give permission for Pacific Link to use any photographs of me (e.g. from presentation ceremonies) for publicity purposes. Yes No

Applicants who are 16 years of age or older at the time of this application, may sign this declaration. Where an applicant is under 16 years of age, this form must be signed by the applicants parent or guardian.

Name		
Parent/Guardian's address if DIFFERENT to applicants address		
		Postcode:
Contact Phone Number:		
Date:		
Signature:		

GUIDELINES TO COMPLETING THE APPLICATION FORM

Section A - Applicant details (*compulsory information*)

In this section, fill in the full details of the applicant applying for the SHEW Funds. Full details are required as incomplete forms may not be considered any further.

Date of birth – Fill in your date of birth. If you are aged under 16 years, please include the name and contact details of your parent/guardian.

Australian citizen/permanent resident – You must be an Australian citizen or permanent resident to be eligible for the Pacific Link Housing SHEW Program.

Section B - Additional Applicant Information (*optional information*)

Please indicate if you:

- are Aboriginal and/or Torres Strait Islander
- are from a language background other than English
- have a disability

You may like to tell us about any previous awards you have received. This will provide us with further background information.

Section C – Applicant’s Statement (*compulsory information*)

Completing the statement – You, the applicant, must complete the questions describing how you would benefit from receiving the SHEW.

Space is provided on the application form to write your statement. Provide enough information in this section to fully answer each question. This is the information we will use to assess your application.

Section D – Applicant’s Declaration (*compulsory information*)

Provision of personal information – It is compulsory for you, the applicant, to certify that the personal information provided in the application form is correct. If this is **not** acknowledged, the application may not be considered any further.

Provision of personal information to administer and disburse funds – It is compulsory for you, the applicant, to acknowledge that information from the application form (including personal details) will be collected, used and disclosed by Pacific Link Housing only for the purpose of assessing the application and administering funds for successful applicants. If this is **not** acknowledged, the application may not be considered any further.

Release of details for publicity – There may be personal situations where an applicants details cannot be released to the public. Consent to publicity and/or public release of personal details in the media is optional and will not affect the assessment of the application.

Signature – If you are 16 years old or over (at the time of the application), you **must** sign the declaration. If you are under 16 years (at the time of the application), your parent/guardian **must** sign the form.

CHECKLIST

Have the following pages of the application form been completed and/or signed?

<input type="checkbox"/>	Section A - Applicant Details (compulsory)	Pages 1 & 2
<input type="checkbox"/>	Section B - Additional Information (optional)	Page 3
<input type="checkbox"/>	Section C - Applicant Statement (compulsory)	Page 4
<input type="checkbox"/>	Section D - Applicant Declaration (compulsory)	Page 5

If you have checked all the boxes, send your completed application form by:

Mail to: The SHEW Program
Pacific Link Housing
PO Box 1888
GOSFORD NSW 2250

Fax to: 4324 1601

Email: info@pacificlink.org.au