

Sport Achievement Funding Program 2023/2024

Form Preview

Sport Achievement Funding Program Application Form

* indicates a required field

Before you continue:

You will need to fully understand the guidelines for the Sport Achievement Funding Program to make sure your application is eligible for funding.

Please read the [Community Funding and Support Program Guidelines](#) before completing this application.

Applicant Details

Applicant Name *

Title

First Name

Last Name

Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

Please provide proof of residency *

Attach a file:

E.g. rates notice, car registration, utility bill, etc. If the applicant is under 18 years proof of residency is be in the name of the parent/guardian.

Phone *

Please include area code

Email *

Must be an email address.

Is the applicant under 18 years? *

- ☐ Yes
☐ No

Parent/Guardian Details

Parent/Guardian Name *

Title

First Name

Last Name

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Event Details

Sport *

**Name of the Event/
Competition ***

Level of Competition *

- ☐ State Championship (representing a regional team)
☐ National Championship (representing Queensland)
☐ International Championship (representing Australia)

Applicants selected in a club/association representative team are not eligible for the state championship funding. Athlete must be selected into a regional team e.g. Metropolitan West School Sport

Event Start Date *

Applications can only be submitted after participation at the event. Applications must be submitted within 6 months of the event

Event End Date *

Event Location *

**How did you qualify for
this event? ***

**Attach evidence of your
selection ***

Attach a file:

(Applicant must provide documentation clearly showing selection. All documentation must be clearly identified as being from the event organiser or selector. Multiple documents can be uploaded with e.g's being; a letter, Facebook post, email or website)

**Attach supporting
photos or videos**

Attach a file:

(e.g. of athlete competing/training)

**I confirm the applicant
has competed at the
event ***

- ☐ Yes
☐ No

Applications can only be submitted after participation at the event. Applications must be submitted no later than 6 months after the event start date.

Budget

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Provide a description and cost of items you are seeking reimbursement for. Items covered under the grant include travel expenses e.g., flights, fuel, accommodation; and costs of competing e.g., compulsory uniforms and levies.

Copies of receipts are to be attached. Invoices are not accepted unless accompanied by proof of payment e.g., receipt or bank statement.

Expenditure Item	\$ Amount	Receipts
	\$	
	\$	
	\$	

Budget Totals

Total Expenditure Amount

\$

This number/amount is calculated.

Previous Applications

Have you received Sport Achievement Funding during this financial year? *

- ☐ Yes
☐ No

Application Number

Sport

Direct Payment Section:

If you are successful in being awarded Sport Achievement Funding, Council will transfer the funds to your nominated bank account.

Bank Account Details *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Certification

* indicates a required field

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I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if my application is approved for this funding, I will be required to accept the terms and conditions of the funding as outlined in the Funding Agreement.

I agree *

☐ Yes

Applicant Name *

Title

First Name

Last Name

Date *

Must be a date.

Parent/Guardian Name *

Title

First Name

Last Name

Date *

Must be a date

Privacy Statement

Ipswich City Council is collecting your personal information so that we can process your request for Sport Achievement Funding. We will not disclose your personal information outside of Council unless we are required by law or you have given your consent. However, in order to perform the above functions, we may need to disclose your personal information to relevant Council Committees, which may be recorded in meeting agendas and formal minutes, which are accessible to the public. Further, your personal information, such as your name, may be discussed at the meetings of Council and its committees which are open to the public. Please also note that, as per the [Community Funding and Support Policy](#), applicants are required to give permission for Council to publish the name of the recipient and the funding amount in accordance with Council's requirements under the Local Government Act 2009 and the Local Government Regulation 2012. By completing and signing this form and returning it to Council, we will consider that you have given us your consent to manage your personal information in the manner described in [Council's Privacy Statement](#), [Personal Information Digest](#) and this collection notice.

Checklist and Feedback

*** indicates a required field**

Have you attached copies of all documents as required to support your application?

Incomplete applications will not be considered.

Checklist *

☐ Proof of Residency

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☐ Evidence of Selection

Applicant Feedback

Council invites feedback from applicants to help us to improve future community funding programs and processes. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Out of 5, how would you rate completing this application form.

1 = Very Difficult, 5 = Very Easy

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Would you like to provide feedback about the application process, (including guidelines, timeframes, resources etc) to assist us to improve the application process and to inform future funding and support programs.

We thank you for your feedback.