Child & Youth Inclusion Grant

* indicates a required field

The Child & Youth Inclusion (CAYI) Grant aims to support young people in participating in formal education and recreational programs and activities.

Funding supports the inclusion of the following Frankston residents who are experiencing financial disadvantage:

- **Education & Pathway:** 12-24 year olds who do not have the financial means to purchase required materials and equipment, or cover course fees for formal education, training and career aspirations
- **Recreation:** 5-18 year olds who do not have the financial means to pay for compulsory fees and/or uniform to participate in recreational activities within Frankston municipality (e.g. school camps, sporting activities, creative activities including dance, music or art) at a not-for-profit provider

Funding

- Education & Pathway: Up to \$600
- Recreation: 75% of fees or up to \$200

PLEASE NOTE: If approved, Council will pay the service provider directly for item or services on receipt of invoice; not the applicant, parent or guardian.

Who is applying for this grant? *

- Applicant (Child or Young Person)
- Parent or Guardian
- Professional support worker

Which funding stream(s) is the applicant applying for? *

- □ Education & Pathway (12-24 year old)
- \Box Recreation (5-18 year old)
- At least 1 choice must be selected.

Please note the age brackets associated with each funding steam

Privacy Statement

The personal information collected on this application form is collected by Frankston City Council for the purposes of assessing eligibility for funding, and the management of any community grants funding provided. Frankston City Council may also use the personal information to distribute mail of interest such as: events, information and other funding opportunities, however, will not otherwise disclose the personal information to any other party without your prior consent or as required by law. You are able to access the personal information that Frankston City Council holds about you, and to request that it be corrected by phoning the Freedom of Information Officer on 1300 322 322.

Terms and Conditions

- Applicants are expected to read and understand the grant guidelines before applying
- Eligibility for funding does not guarantee an application will be granted. Council has full discretion on funding decisions and these are final
- Child & Youth Inclusion Grant is limited to the amount of funds allocated in Council's annual budget
- Allocation of funds to an applicant for any purpose in any year must not be taken as a commitment by Council for funding in a subsequent year
- Only one application per funding stream, per financial year, per applicant, will be accepted.
- Each application will be considered on its own merits
- All applicants and recipients of the grants under the Community Grants Program must abide to the Council's <u>Community Grants Policy</u> (open in a separate tab)

Successful recipients must:

- Agree the grant is paid directly to the provider, not the applicant, parent or guardian
- Cover all other costs associated with the proposed activity. Council's contribution will be limited to the amount granted
- If applicable, must make application and obtain Council's approval of any significant substantial changes to their funding activity or reporting requirements (extension to deadlines). At request, Council officer can attach a Grant Variation Request form to your application via SmartyGrants.

Service providers are:

- Expected to invoice Council and acquit the funding within 12 months of that same financial year or before a new round of the same grant
- Required to comply with all relevant child safety legislation which may include, but is not limited to, The Victorian Child Safe Standards (2022) and The Child Wellbeing and Safety Act (2005). Council *may* request evidence of compliance. If you are unsure about your responsibilities in relation the Victorian Child Safe Standards visit <u>https://ccyp.vic.gov.au/child-safe-standards/</u> (open in a seperate tab).

Grants Cancellation

Grants will be cancelled and requested to be returned to Council if Council has made an allocation with:

- False or misleading information, as provided by the applicant;
- The applicant withdraws from the activity;
- Is not undertaking the activity as applied; and, or
- The activity has been cancelled

Acceptance

Do you accept these terms and conditions of the grant? *

- Yes
- O No

To apply for this grant, you must accept the grant conditions written above.

Please contact the Community Grants Officer on 9784 1035 or <u>email</u> before continuing.

Applicant Information

* indicates a required field

Applicant (Child or Young Person's Name) *

Title First Name Last Name

Applicant Phone Number *

Applicant Email *

Must be an email address.

Date of Birth *

Must be a date.

Applicant's age (at time of application) *

Must be a number and between 5 and 24.

Does the applicant: *

- □ Live in Frankston municipality
- □ Studying at school / TAFE / University located in Frankston municipality
- □ None of the above (ineligible)

At least 1 choice must be selected.

Ineligible

Unfortunately, the answer you've provided on this form have indicated that you may be ineligible for this grant.

To be eligible for this grant you must either:

- Living in Frankston municipality
- Studying at school / TAFE / University located in Frankston municipality

Please refer to the grant guidelines for more information regarding eligibility or contact the Community Grants Officer by <u>email</u> or calling (03) 9784 1035 before continuing.

Ineligible

Unfortunately, the answer you've provided on this form have indicated that you may be ineligible for this grant.

To be eligible for this grant you must either:

- 12-24 years olds for the education & pathway funding stream, OR
- 5-18 year olds for recreation funding stream

Please refer to the grant guidelines for more information regarding eligibility or contact the Community Grants Officer by <u>email</u> or calling (03) 9784 1035 before continuing.

Address of applicant (Must be in Frankston City) *

Address

Which educational institute does the applicant currently study at? (i.e. High School, Chisholm TAFE, Monash University) *

Address of the education institute (Must be in Frankston City) Address

Any, but at least one field is required.

What is the applicant's current year level at school / what course are you studying? *

Evidence of enrolment in education institute located in Frankston City * Attach a file:

Guardian or Parent Information

Applicant's Parent or Guardian Name *

Title First Name Last Name

Relationship with applicant *

Phone Number *

Must be an Australian phone number.

Email *

Must be an email address.

Financial Situation

This grant is for children and youth experiencing financial disadvantage who holds a health care or pension concession card. Other supporting evidence of financial hardship may be considered as part of the application on a case-by-case basis.

Is the applicant experiencing financial disadvantage? *

- ⊖ Yes
- No (ineligible)

Please choose one that best describes the applicant's situation *

- Holds a health care or pension concession card
- Have other supporting evidence of financial hardship and identification
- No evidence of financial hardship (ineligible)

Health Care or Pension Concession Card

Please attach a copy of your current Health Care Card or Pension Concession Card: *

Attach a file:

If you are unable to attach documents, please contact the Community Grants Officer on 9784 1035 or communitygrants@frankston.vic.gov.au. Please note that scanning and printing is available at Frankston City Libraries (open in a new tab) or Frankston Youth Central(open in a new tab).

Other supporting evidence of financial hardship

Please note other supporting evidence of financial hardship may be considered as part of the application on a case-by-case basis.

Examples of evidence include a letter from the applicant's professional support worker, coach or GP that states that they are experiencing financial hardship.

Community Grants Officer will contact you whether your evidence is adequate for this application and/or explore other options.

Please attach evidence of financial hardship (e.g. Letter of support from support worker, wellbeing team, coach or GP) *

Attach a file:

Please provide a copy of an identification document for the applicant (e.g. student card, drivers licence or passport) * Attach a file:

If you are unsure of what documentation to provide in this section or unable to attach documents, please contact the Community Grants Officer during business hours on 9784 1035 or email communitygrants@frankston.vic.gov.au. Please note that scanning and printing is available at <u>Frankston City Libraries</u> (open in a new tab) or <u>Frankston Youth</u> Central (open in a new tab).

Ineligible

Unfortunately, the answers provided above has indicated that you do not meet the criteria for this grant.

Applicants for the Child and Youth Inclusion Grant, must be a person experiencing financial disadvantage who holds a health care or pension concession card. Other supporting evidence of financial hardship may be considered as part of the application on a case-by-case basis.

If you have any questions or would like to discuss the eligibility for this grant, please contact the Community Grants Officer by emailing communitygrants@frankston.vic.gov.au or calling 9784 1035.

Previous Funding

Has the applicant previously received a CAYI Grant from Council between July 2023 to June 2024? *

- ⊖ Yes
- O No
- Unsure

What month and year did the applicant last receive funding from Frankston City Council? $\ensuremath{^*}$

Which funding stream was the funding for? *

- □ Education & Pathway
- □ Recreation

What was the previous funding for? *

Please note that applicants are ineligible if they are previous CAYI Grant recipients for the same activity within the same financial year (assistance can be provided for more than one family member per financial year).

Education & Pathway Information

* indicates a required field

Description

This funding stream is for 12-24 year olds who do not have the financial means to

- purchase required materials and equipment, or
- cover course fees

for formal education, training and career aspirations

If approved, Council will pay the provider directly for item or services on receipt of invoice; not the applicant, parent or guardian.

Providers must either have an ABN or willing to complete a Statement by a Supplier form.

What item or service does the applicant want the CAYI Grant to financially support with?

Please note: This grant **cannot fund retrospective funding** for purchases/activities that have already been completed or purchased.

Please **avoid using discounted price** - we cannot guarantee that your grant will be granted before a sale ends.

ltem / Service	Further Details	Provider / Retailer	Total Cost	Requested amount	Please provide evidence of the costs
(e.g. school books, school uniform, TAFE fees, laptop, work boots)	(e.g. uniform/ shoe size, course name, laptop model, unique code)	(e.g. school uniform shop, TAFE, JB HIFI, RSEA)	How much does it costs?	How much of the costs would you like the grant to fund?	(e.g. quote, invoice, screenshot)
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	

Total Requested Amount

How we calculate the requested amount for this funding stream: Requested amount listed in the above table are summed up

The grant request amount for this funding stream is **capped at \$600.**

Total requested amount

\$ This number/amount is calculated. What is the total financial support you are requesting in this application?

Benefits of the item/service

The item(s) or service(s) requested will support the applicant's: *

- □ Education
- □ Training
- □ Career Aspiration
- \Box None of the above (ineligible)

Please tell us more on how the item(s) or service(s) above will support the applicant's education, training and/or career aspiration? Please include what the applicant is wanting to study or career the applicant is aspiring to reach. *

Word count: Must be no more than 250 words.

Optional - Attach letter of support

Attach a file:

Has the applicant received any other funding for the requested item or service? *

- ⊖ Yes
- O No

Please provide details (how much and from what source) of the other funding received by the applicant for the requested item or service? *

Recreation Information

* indicates a required field

Description

This funding stream is for 5-18 year olds who do not have the financial means to pay for

- compulsory fees, and/or
- uniform

to participate in recreational activities within Frankston municipality (e.g. school camps, sporting activities, creative activities including dance, music or art).

The requested recreational activity provider must be

- based within Frankston municipality
- not-for-profit

What type of recreational activity does the applicant want to participate in using the grant funding? $\ensuremath{^*}$

- □ Sport
- □ Art
- \Box Dance

MusicScoutsOther:

□ Camping

What does the applicant need financial support with *

- □ Compulsory club or group fees
- □ Compulsory uniform

What is the name of the not-for-profit club or group the applicant would like to join or participate with in FY 2023-24? * Organisation Name

The group / club must be located within Frankston City

Is the applicant: *

- An existing member of the group or club
- Joining for the first time

Is the group or club not-for-profit? *

- ⊖ Yes
- No (ineligible)

Not-for-profit organisations provides services or undertake activities for the community's benefit and does not operate to make a profit from its members or clients. If you're unsure, check with the service provider.

Is the group or club based in Frankston municipality? *

- ⊖ Yes
- No (ineligible)

Ineligible

Unfortunately, the answers provided above has indicated that you do not meet the criteria for this grant.

The requested recreational activity provider must be both

- not-for-profit
- and based in Frankston municipality

Not-for-profit organisations provides services or undertake activities for the community's benefit and does not operate to make a profit from its members or clients.

If you have any questions or would like to discuss the eligibility for this grant, please contact the Community Grants Officer by emailing communitygrants@frankston.vic.gov.au or calling 9784 1035.

	Group's Conta First Name		
Club or Group's Phone Number *			

Club or Group's Email *

Must be an email address.

Compulsory Group or Club Fees

Please note retrospective activities is ineligible for funding

Please provide a description of group or club fees (e.g. Annual membership fee, Summer season registration fees or Winter season registration fees etc.) *

Word count: Must be no more than 100 words.

Total cost of group or club fees *

\$ Must be a dollar amount.

Please attach evidence of group or club fees * Attach a file:

Evidence must clearly show the club/group name and the description and costs of fees (e.g. invoice, screenshot from website, email from club/group)

Compulsory Uniform

Please provide a description of the compulsory uniform (must be purchasable from the club or group) $\ensuremath{^*}$

Word count: Must be no more than 100 words.

Total costs of compulsory uniform *

\$ Must be a dollar amount.

Please see attached evidence of compulsory uniform and its costs * Attach a file:

Evidence must clearly indicate that the uniform is compulsory and show a description and cost of the uniform (e.g. email from club/group, screenshot from website, invoice)

Total Requested Amount

How we calculate the requested amount for this funding stream: Club fees and/or uniform costs X 75%

The grant request amount for this funding stream is **capped at \$200.00**. If the calculated amount is more than \$200, the grant request amount is \$200.

Total Requested Amount (75% of costs or Up to \$200)

\$ This number/amount is calculated.

Purpose

How will this grant support the applicant's ability to participate or join a recreational activity? *

Word count: Must be no more than 250 words.

Optional - Attach letter of support or any other supporting documents

Attach a file:

Declaration and Feedback

* indicates a required field

Applicant Declaration

I declare that

- I am authorised to complete this application
- Information in this application and any attachments is true and correct

I agree: *

⊖ Yes

⊖ No

*		
First Name	Last Name	
Date of declaration *		
Must be a date.		

Parent / Guardian Declaration

I declare:

- the information in the application and any attachment(s) is true and correct
- I am authorised to complete this application on behalf of the applicant.

l agree * ○ Yes		⊖ No
Relationship with a	pplicant *	
*		
First Name	Last Name	
Date of declaration	*	
Must be a date.		

Professional Support Worker

I declare:

- The information in the application and any attachment(s) is true and correct
- I have permission from the applicant
- I have permission from the applicant's parents/guardian (if the applicant is under 18)

O No

l agree: * O Yes	C
Applicant's Professi First Name	onal Support Worker * Last Name
Organisation / Name Organisation Name	e *

Position *

Phone Number *

Email *

Must be an email address.

Date of declaration *

Must be a date.

Feedback

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

How did you hear about Frankston City Council's Community Grants Program? *

- Community Grants Email Alert
- Frankston Youth Service
- □ Sports Club
- □ Frankston City Libraries
- □ Community Centres
- □ Frankston Youth Network Meeting
- □ Project-Y Meeting
- Social Media
- Council website
- □ Frankston News (newspaper)
- □ Frankston e-newsletter
- Other:

How satisfied were you with the application process: *

- Very Satisfied
- Satisfied
- Neutral
- Unsatisfied
- Very Unsatisfied

Please select any Council support you used to apply for this grant (optional)

- □ One-on-one support session with the Community Grants Officer
- One-on-one support session with a Youth Worker
- \Box Other:

Any additional feedback (optional)