



Diamond Valley Community Support KidsAssist Education Application Form

KidsAssist grants are part of the DVCS Emergency relief program and are designed to support those experiencing financial hardship or crisis.

To be eligible for KidsAssist Education the parent/guardian must: reside in Banyule City Council Areas of Briar Hill, Bundoora (part of), Eltham North (part of), Greensborough (part of), Lower Plenty, Montmorency, St Helena and Watsonia OR in Nillumbik Shire Council.

OR

the student must be attending a primary or secondary school in the Banyule Council (North East Region) or Nillumbik Shire Council region. If you are unsure, please contact DVCS on 9435 8282.

Referral School

School name: _____

School contact _____

School Address: Last First Title / Position

Street Address

Suburb Postcode

Phone: _____ Email _____

PARENT / GUARDIAN CONTACT DETAILS

Parent/Guardian _____

Address: First Last Relationship with the child

Street Address

Suburb Postcode

Phone: _____ Email _____



YES NO

Does the parent/guardian have a Health Care/ Centrelink Card?

If yes please enter:

Centrelink Card: _____

Payment Type _____

TOTAL AMOUNT REQUESTED _____

How many students are you making this application for? _____

STUDENT DETAILS

STUDENT 1

First name: _____

Last name: _____ Year Level: _____

How will the funding be allocated?

Excursions/camps (eg. End of Year Camp, Zoo excursion, Maths camp) _____

School Sports (eg. Swimming Carnival, Cross Country, Sports Lessons) _____

Electronic devices (eg. Ipad, Calculator, laptop) _____

Stationery/Textbooks (eg. writing books, art supplies, maths/literacy books) _____

Other Essential Education Items/Activity _____

STUDENT 2

First name: _____

Last name: _____ Year Level: _____



How will the funding be allocated?

- Excursions/camps (eg. End of Year Camp, Zoo excursion, Maths camp) _____
- School Sports (eg. Swimming Carnival, Cross Country, Sports Lessons) _____
- Electronic devices (eg. Ipad, Calculator, laptop) _____
- Stationery/Textbooks (eg. writing books, art supplies, maths/literacy books) _____
- Other Essential Education Items/Activity _____

STUDENT 3

First name: _____
 Last name: _____ Year Level: _____

How will the funding be allocated?

- Excursions/camps (eg. End of Year Camp, Zoo excursion, Maths camp) _____
- School Sports (eg. Swimming Carnival, Cross Country, Sports Lessons) _____
- Electronic devices (eg. Ipad, Calculator, laptop) _____
- Stationery/Textbooks (eg. writing books, art supplies, maths/literacy books) _____
- Other Essential Education Items/Activity _____

FUNDING REQUIREMENTS

I confirm that I am facing financial hardship or crisis and am not able to cover the full cost of my child/s education.? YES NO

Reasons for seeking assistance. Please explain the circumstances surrounding the family's financial hardship and reasons for seeking assistance.

- Unemployment
- Disability
- Illness
- Family Breakdown
- Housing Difficulties
- Unexpected Costs
- Sole Parent
- Other (please specify):



	YES	NO
Has the family applied for Camps, Schools and Excursions Fund (CSEF)?	<input type="checkbox"/>	<input type="checkbox"/>
	YES	NO
Has the family applied to State Schools Relief (SSR)?	<input type="checkbox"/>	<input type="checkbox"/>

Consent to Collect Personal Information - PARENT/ GUARDIAN TO COMPLETE

PRIVACY STATEMENT - Consent to Collect Personal Information - PARENT/ GUARDIAN TO COMPLETE The information that you provide on this form includes your personal information. Your personal information is protected by law, including the Privacy Act 1988. Your personal information collected on this form is used primarily for Diamond Valley Community Support Inc. (DVCS) purposes for providing services to the local community, planning and community development. As part of the services provided to you, DVCS needs to collect some information about you to place on the DVCS database. This information will be destroyed seven years after your last application. DVCS will not provide your personal information to organisations or individuals without your permission, unless necessary to prevent or lessen a serious and imminent threat to your or another person's life, health or safety, or if disclosure is required by or under law. DVCS has a privacy policy and you can ask for a copy of that policy. You can ask DVCS to see your personal information and request that your information be corrected and if you think your privacy has not been protected you can make a complaint. Further information about how DVCS manages your personal information can be obtained by calling 9435 8282 during operating hours or by e-mailing eo@dvsupport.org.au.

I consent to DVCS collecting, storing and using the information I have provided to DVCS explicitly for the purposes detailed above.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I give consent for DVCS to make payment of the amount applied for to the nominated school listed via electronic funds and that payment reference will be the child/family name.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I confirm that I or no other close relative of the child (eg. father / mother, grandparent etc) has already applied to DVCS for KidsAssist Funding	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I understand that DVCS will instruct the school to allocate the payment as per the request	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I understand that DVCS may contact me to obtain further information to assess my application	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I consent to providing confidential feedback on the KidsAssist Education Assistance Program 2020?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Parent Guardian name: _____

Date of Application _____