

Youth Engagement Grants Program

Youth Vibe Holiday Grants

Application Form

Name of Applicant/Organisation:			
Postal Address:			
Name of Person organising the Activity:			
Position title:			
Name of Activity:			
Location of Activity:			
Date/s of Activity:			
Telephone:		Fax:	
Email:			
Are you interested in being on our Email Distribution List?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Facilitator of this Event/Activity hold a current Ochre Card or Exemption Authority?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(Please contact us)</i>

1. Is your Organisation Incorporated?		
<i>(Please note: all major grants [\$501-2,000] must be awarded through a legally incorporated organisation). i.e. an auspice</i>		
<input type="checkbox"/> Yes	Please provide date of Incorporation:	
<input type="checkbox"/> No	Please provide details of Sponsoring Body:	

2. Is your Organisation/Sponsoring Body Registered for GST?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
What is your Organisation's/Sponsoring Body's Australian Business Number (ABN)?		

3. Are you or your Sponsoring Body an Income Tax Exempt Body?		
<input type="checkbox"/>	Please provide:	Date of Effect:
		Tax Exempt Category:
		A copy of your tax exempt endorsement
<input type="checkbox"/> No		

4. Is this the first time you/your organisation have requested funded from the Office of Youth Affairs?	
<i>(If no, you will not be eligible for funding if you have not previously acquitted a grant provided by this office)</i>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

ABOUT YOUR ACTIVITY

5. Please provide a detailed description of the activity.
<i>(This is your opportunity to "sell" your activity! You can attach whatever materials you like to explain and promote your idea)</i>

6. What is the aim of this activity?	
Aim	How will you achieve this? <i>(please specify)</i>
<input type="checkbox"/> provide safe entertainment during school holidays	
<input type="checkbox"/> prevent boredom during school holidays	
<input type="checkbox"/> opportunities for potential career paths	
<input type="checkbox"/> encourage school attendance	
<input type="checkbox"/> develop and learn new skills	
<input type="checkbox"/> celebrate achievements	
<input type="checkbox"/> engage local services and young people	
<input type="checkbox"/> Other <i>(please specify):</i>	

WHO ARE YOU TARGETING?

7. What age group are you targeting and how many young people are anticipated to attend? <i>(e.g. 12-25 year olds, 200 young people)</i>			
What age group are you targeting?		How many young people are anticipated to attend this event/activity?	
<input type="checkbox"/>	< 12 years of age	<input type="checkbox"/>	1-15
<input type="checkbox"/>	12-15 years of age	<input type="checkbox"/>	16-50
<input type="checkbox"/>	15-18 years of age	<input type="checkbox"/>	51-100
<input type="checkbox"/>	18-25 years of age	<input type="checkbox"/>	101-200
<input type="checkbox"/>	> 25 years of age	<input type="checkbox"/>	Other:

8. Are there any particular groups of young people you are targeting and why?			
Groups	Why	Groups	Why
<input type="checkbox"/>	Indigenous:	<input type="checkbox"/>	Homeless (or at risk of):
<input type="checkbox"/>	Torres Strait Island:	<input type="checkbox"/>	GLBT:
<input type="checkbox"/>	CALD:	<input type="checkbox"/>	Mental Illness:
<input type="checkbox"/>	Remote/Rural:	<input type="checkbox"/>	In-Out Home Care:
<input type="checkbox"/>	Disability:	<input type="checkbox"/>	Other <i>(please specify)</i> :

ABOUT THE GRANT

9. What grant are you applying for?	
<input type="checkbox"/> Mini <i>(up to \$500)</i>	<input type="checkbox"/> Major <i>(\$501-2,000)</i>

10. How much funding are you requesting? <i>(maximum is \$2,000 nil GST)</i>
\$

11. What category of activity do you need funding for? <i>(if more information is required, refer to grant criteria within the guidelines)</i>	
<input type="checkbox"/> Drug and Alcohol Free Entertainment	<input type="checkbox"/> Youth Development/Leadership

12. Have you applied for/or received funding from another Australia, Territory or Local Government agency or another organisation for the activity you are applying for? <i>(If yes, please provide details of the organisation, amount awarded or the dates you expect to be advised on whether your application was successful. In addition, you need to advise us for the purpose of the funding, for example, catering, materials, promotion, etc to ensure that you are not funded twice for the same portion of the activity should the application be successful)</i>	
<input type="checkbox"/> Yes	If YES, please specify:
<input type="checkbox"/> No	

THE BUDGET GUIDE

13. Please detail what you will be spending the youth engagement grant funding on. Please check the grant guidelines for details of what is eligible for funding and what is not.	
Item	Amount
Wage/Fees <i>(up to \$500 and specify who's wages/fees)</i>	
Catering	
Hire Venue	
Hire of Equipment	
Consumables	
Capital Equipment <i>(up to \$500 and specify what equipment is)</i>	
Travel	
Airfares	
Accommodation	
Other <i>(please specify)</i>	
Other <i>(please specify)</i>	
Total Expenditure	\$

HOW WILL YOU ORGANISE IT

14. Which steps are young people involved in? How many young people are involved? <i>(please specify approximate numbers)</i>					
Steps		Specify	Steps		Specify
<input type="checkbox"/>	Planning		<input type="checkbox"/>	Organising	
<input type="checkbox"/>	Promoting		<input type="checkbox"/>	Facilitating	
<input type="checkbox"/>	Evaluating		<input type="checkbox"/>	Attending	
<input type="checkbox"/>	Reporting		<input type="checkbox"/>	Other <i>(please specify)</i>	

15. What kind of commitment will your organisation give to this activity? <i>(note, this will help you to evaluate your project)</i>	
Type of Commitment	Specify
<input type="checkbox"/> Financial	
<input type="checkbox"/> Administration	
<input type="checkbox"/> Staff/Volunteers	
<input type="checkbox"/> Insurance	
<input type="checkbox"/> Use of Facilities	
<input type="checkbox"/> Other	

NORTHERN TERRITORY GOVERNMENT SPONSORSHIP

16. Recognition of the sponsorship of the Northern Territory Government is a condition of the funding. Please select how you will promote the Northern Territory Government.			
<input type="checkbox"/> Media Advertising		<input type="checkbox"/> Posters	
<input type="checkbox"/> Website		<input type="checkbox"/> Program	
<input type="checkbox"/> Tickets		<input type="checkbox"/> Banners	
<input type="checkbox"/> Printed Materials		<input type="checkbox"/> Other <i>(please specify)</i>	

EVALUATION

17. How will you measure the success of the project? Please select from the following and specify. <i>(note, this will help you to evaluate your project)</i>	
Measure of Success?	Specify
<input type="checkbox"/> Statistics	
<input type="checkbox"/> Questionnaire/Surveys	
<input type="checkbox"/> Interviews	
<input type="checkbox"/> Other <i>(please specify)</i>	

18. Would you be willing to provide the Office of Youth Affairs with CD's, photos and other materials when returning your evaluation and acquittal forms, demonstrating the success of your project? Or upload directly onto our Facebook and Twitter page 'YouthNT'.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

19. How did you find out about the Youth Engagement Grants Program?	
<input type="checkbox"/> Facebook Advertisement/Account	
<input type="checkbox"/> Twitter Account	
<input type="checkbox"/> Instagram Account	
<input type="checkbox"/> Email	
<input type="checkbox"/> Office of Youth Affairs Website	
<input type="checkbox"/> Word of Mouth	
<input type="checkbox"/> Other <i>(please specify)</i>	

PRIOR TO SUBMISSION OF APPLICATION

20. Checklist <i>(please complete before submitting)</i>	
<input type="checkbox"/>	completed all 20 questions
<input type="checkbox"/>	signed and completed the authorisation
<input type="checkbox"/>	taken a copy of all documentation for your records

AUTHORISATION

I certify, as an authorised representative of the organisation, that the information given in this application is true and correct (applicants under the age of 18 must obtain the signature of their parent/guardian). I understand that should this application be successful, some of the information herein may be used for promotional purposes.

Signature:		Date:	
Printed Name:			
Position Held:			
Sponsoring Body:			

SUBMISSION OF APPLICATION

Post	Hand Delivery
Grants and Multimedia Officer Territory Families PO Box 40596 Casuarina NT 0811	Grants and Multimedia Officer Territory Families Level 7, Darwin Plaza 41 Smith Street Mall, Darwin NT 0801
Email	
oya@nt.gov.au	

PRIVACY NOTICE

The Office of Youth Affairs (OYA) is collecting the information on this form to ascertain whether or not your application meets the Youth Engagement Grants criteria. If you do not provide all the information requested, OYA may be unable to process your application for funding.

If this application is successful, some of the information in this application form will be provided to the Office of the Minister for Territory Families, Territory Families, Media Organisations, Youth Organisations, Local Governing Bodies and young people for the purpose of promoting and reporting on your activity. Information will be distributed via press releases, promotional material on the youth and Territory Families websites, and other departmental publications.

The personal information you provide is able to be accessed and corrected if necessary by you or your nominated representative by application or request to OYA. If you have any queries, please telephone OYA on (08) 8999 3881, email oya@nt.gov.au or by post to PO Box 40596, Casuarina NT 0811.