**Youth Representative Grants Program 2025/2026**

**Guidelines & Application Form**

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| **Program Overview** |
| To provide financial support for young residents who have been selected to represent their community, region, or state in sporting, academic, cultural, or other achievement-based events at local, national, or international levels. |

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| **Eligibility Criteria** |
| Applicants must:   * Be aged between 12 and 18 inclusive or be a registered student under the age of 25 on or prior to the commencement date of the representative event. * Reside within the council’s municipal area (proof of residence required) * Have been officially selected by a recognised association, school, or governing body to participate in a representative event. * Be participating in an **amateur** (non-professional) event. * Demonstrate that they are required to meet a substantial portion of the expenses themselves. * Not have received substantial sponsorship from other organisations for the same event (other sponsorships will be considered in the assessment).   Funding may be provided for:   * Sporting competitions (e.g., state, national, international championships) * Academic competitions (e.g., Olympiads, conferences, national or international contests) * Cultural or other achievement-based events (e.g., music, arts, leadership forums) * Costs such as travel, accommodation, registration fees, and uniforms directly related to the event.   Funding is not available for:   * Events that have commenced or already taken place (retrospective funding) * Applications that have not been received four weeks prior to the event * Applicants that have already received funding through councils Youth Representative Grants Program within the same financial year. |

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| **Identification Requirements** |
| Applicants are required to reside within the council’s municipal area. Proof of residency must be provided when submitting the application. Acceptable documents must display your name and residential address. Examples may include, but are not limited to:   * + ID Card   + Drivers License   + Utility Bill (addressed to the listed parent/guardian is acceptable where the applicant is under the age of 18)   + Top section of a bill/statement where the address and name are listed   Please contact the Community Services Department on (03) 6323 9200 for assistance if you are unable to provide any of the above options. |

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| **Funding Levels** |

Maximum donation ranges are set for both individual representation and groups.

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| **Level of Representation** | **Donation Value** |
| Local/Intrastate | Up to the value of $200 |
| National/Interstate | Up to the value of $500 |
| International (outside of Aus) | Up to the value of $1000 |

Maximum donation amount per school, group or team:

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| **Level of Representation** | **Donation Value** |
| Local/Intrastate | Up to the value of $1000 |
| National/Interstate | Up to the value of $1000 |
| International (outside of Aus) | Up to the value of $1000 |

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| **Application Process** |
| Applications must be submitted a minimum of 4 weeks **before the event**.  Applicants must provide:   * A letter of request outlining the event and financial need. * Written confirmation of selection from the relevant association or organisation. * A budget outlining expected costs, and any other funding received or sought. * Additional information or an application interview may be requested during the processing of your application.   Applications are assessed on a rolling basis, subject to available Council funds, or other achievement-based events at local, national, or international levels.  Applications will be assessed:   * In line with the Council’s policy objectives * Level of financial need * Significance of the event (local, national or international) * Previous support received (repeat applications may be considered, but priority may be given to first-time applicants |

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| **Recognition and Reporting** |
| * Successful recipients will be acknowledged through Council communications * Recipients may be required to complete a brief report and or complete a short interview after the event, sharing their experience and outcomes. This may be utilised and promoted through council communications. |

**Youth Representative Grants Program 2025/2026 - Application Form**

This application is for young residents applying for financial assistance to support sports, academic, cultural, or other achievement-based representation at local, national, or international events.

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| **Applicant Details** | | |
| Full Name |  | |
| Date of Birth |  | |
| Age |  | |
| Residential Address |  | |
| Phone Number |  | |
| Email Address |  | |
| Are you a resident of the West Tamar? | Yes ¨ | No ¨ |
| Have you read and understood the  Youth Representative Grants Program Guidelines? | Yes ¨ | No ¨ |

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| **Parent/Guardian Details** |

This section is **only required** where the applicant is under the age of 18.

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| Full Name |  | |
| Residential Address |  | |
| Phone Number |  | |
| Email Address |  | |
| Have you read and understood the  Youth Representative Grants Program Guidelines? | Yes ¨ | No ¨ |

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| **Event Details** | |
| Select the event type: | |
| Sporting | ¨ |
| Academic | ¨ |
| Cultural | ¨ |
| Other (please specify) |  |

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| **Event Location** | |
| Select the event location: | |
| Local/Intrastate | ¨ |
| National/Interstate | ¨ |
| International (outside Aus) | ¨ |

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| **Provide a brief description of the event and your role (50-150 words)** |
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| **Selection and Achievement Evidence** | |
| Your application must be submitted with the following attachments/evidence. Please complete the below check list to acknowledge that you are aware that this documentation will be submitted with your application. | |
| Official letter or email from the organising body confirming your selection/participation | ¨ |
| Evidence of the costs/fees associated with the event (outlined in the Financial Details section) | ¨ |
| Event program/invitation or official documentation outlining the event | ¨ |
| Letters of support from any of the following:   * + Coach, teacher or mentor   + School principal or organisation official   + Community leader   A minimum of 2 letters of support must be attached and must include contact details for verification purposes. The person providing support does not need to be affiliated with the event or club being represented. | ¨ |

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| **Explain how this opportunity will benefit you, your community and your future goals (50-200 words)** |
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| **Financial Details** | | | | |
| Provide a breakdown of costs *(relating to individual applicant or group only)* | | | | |
| Travel | **$** | | | |
| Accommodation | **$** | | | |
| Registrations Fees | **$** | | | |
| Uniform/Equipment | **$** | | | |
| Other (please specify) | **$** | Details: | | |
| What is the funding amount are you requesting from council. | | | **$** | |
| Have you previously received funding support from Council? | | | Yes ¨ | No ¨ |
| Have you applied for or received any other funding for this event? | | | Yes ¨ | No ¨ |

If yes, to either of the above, please provide details (year and amount, the funding source, amount and status, etc.)

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| **Financial Institution details** | |
| This information will be used solely to process the payment of funds, only if this application is approved | |
| BSB Number |  |
| Account Number |  |
| Name of Financial Institution |  |
| Name/s on Account |  |
| Email Address for remittance |  |

*By signing this document, you are authorising EFT payments from West Tamar Council to be sent to the above account.*

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| **Final Checklist** | |
| Before you lodge your application, check that you have provided all the required details and documents.  Ensure you have: | |
| ¨ | Checked age and eligibility criteria, read and understood the guidelines |
| ¨ | Provided proof of selection/participation |
| ¨ | Completed the cost breakdown with supporting documentation, and provided Financial Institution details |
| ¨ | Provided at least 2 letters of support |
| ¨ | Provided proof of residence |
| ¨ | Signed the Declaration *(below)* |

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| **Declaration** |
| I declare that the information provided in this application is true and correct. I understand that providing false or misleading information may result in my application being withdrawn |

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| Applicant Full Name and Signature |  |
| Date |  |
| Parent/Guardian Full Name and Signature |  |
| Date |  |

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| **Submission** | |
| Submit your completed application and supporting documents (minimum of 4 weeks **before the event)** | |
| Email: | [wtc@wtc.tas.gov.au](mailto:wtc@wtc.tas.gov.au) |
| Mail | West Tamar Council  Youth Representative Grants Program  PO Box 16  Riverside TAS 7250 |
| In person | At any West Tamar Council Office   * Riverside (Eden Street) * Windsor (Windsor Community Precinct, Riverside) * Beaconsfield (West Street, Beaconsfield) |