

What is the Purpose of the Program and what will it deliver:

Evaluation: (Give an example of how you will measure your success)

Support Requested

Total cost of program \$ _____

Total value of support requested \$ _____

Program Budget: (Please note total revenue should be the same as total expenditure)

Expenditure item excluding GST (What are your costs?)	Proposed Amount
TOTAL EXPENDITURE – excluding GST	\$ _____
Revenue Item * excluding GST (How are you going to pay for it?)	Proposed Amount
GSSTA	
Supplied by yourself/Club/Association	
Other Source (Please List)	
TOTAL REVENUE – excluding GST	\$ _____

In signing this application you acknowledge the requirement to acquit your support within 30 days following the program completion date. If any funds are not expended you must request a variation to your application.

Signature of Applicant _____

Date _____

If under 18 years of age, parent/guardian:

Signature of parent/guardian _____

Date _____

Received by _____

Date _____

Office use only