

Veteran Sport Australia – Financial Assistance Application Form

Background

The VSA Financial Assistance program is designed to support those who are unable to take advantage of sport and recreation opportunities due to their personal financial situation.

If you require assistance filling out this form please contact us at 02 9264 8188 (Option 4) or financialassistance@veteransport.org.au

If you need more room to answer, feel free to attach additional pages to your application.

PART A (All applicants to complete)

i. Contact details of person seeking assistance

Full Name:		DOB:
Current address:		
Suburb:	State:	Post Code:
Phone number:	Mobile:	
Email:		

ii. Service information

Veteran Sport Australia can only provide this financial assistance for sport and recreational related activities to former serving members of the Australian Defence Force and their families.

Service/PMKeys Number:		Unit:
Discharge Date:		
If you are not the veteran seeking assistance, please state your relationship to the veteran:		
Full Name:		DOB:
Relationship to the veteran: Spouse / Partner / Dependent / Parent / Child:		
Other family member (please specify):		
Current address:		
Suburb:	State:	Post Code:
Phone number:	Mobile:	

iii. Overview of Assistance Sought

Please describe a description of the assistance you are applying for, including amount. (Please ensure an invoice for your request is attached to your application):

a. Impact of Support

How will this assistance improve your health and wellbeing, especially in recovery from illness and injury or other similar circumstance:

b. Overview of circumstances

Provide a description of your current situation and why the assistance is being requested, making reference to your current financial circumstance and your ability to engage with sport and recreation activities without VSA Financial Assistance:

Please advise your ability to continue and self-sustain the activity or maintain the service of equipment requested:

Please advise if you are able to make a partial payment toward the financial assistance requested:

Please advise whether you have received VSA financial assistance in the past or received funding from other sources e.g. grants, sponsorship, RSL DefenceCare:

c. Current membership and event involvement

Please outline details of any current memberships you hold, such as a club or sporting organisations you are involved with:

Please advise of state, national or international events or teams you have previously been involved with (e.g. Warrior Games, Invictus Games):

d. Nominated health care practitioner (Not Mandatory)

This section is for those applicants who have medical/health practitioner support as part of their rehabilitation or ongoing recovery plan. It can be filled out by practitioners including a GP, Psychiatrist, Psychologist, Physiotherapist etc.

I, (Full name)

of (address)

Make the following statements with regards to the application for sport assistance and benefit for applicant:

Practitioner Signature:

Printed name:

Date:

Veteran Sport Australia sometimes shares stories about our clients with our donors and supporters. It is a way for us to show them how their support has allowed us to help individuals like yourself. This could take the form of your story (names and personal details withheld) posted on our website, social media sites, on a poster or brochure etc.

*Do you consent to Veteran Sport Australia sharing your story online/and or in publications (names and personal details withheld)? **YES/NO (circle one)***

*Can we contact you to discuss other ways of sharing your story with our supporters? **YES/ NO (circle one)***

*Do you consent to receiving monthly VSA newsletters **YES/ NO (circle one)***

Declaration by applicant
I, (Full name)
of (address)
declare that the statements made in this application are to the best of my knowledge and belief, true in every detail.
Signature:
Date:

PART B (Only applications over \$1000)

Please select format to display income: **Weekly / Fortnightly / Monthly / Quarterly**

Income: Please detail any person that contributes to the household financially				
Income type	Service Member	Spouse/ Partner	Other	Total
Wages	\$	\$	\$	\$
Current Assistance (e.g. DVA, Defence Care, Centrelink, other organisations)	\$	\$	\$	\$
Other (Please specify);	\$	\$	\$	\$
Other (Please specify);	\$	\$	\$	\$
Totals	\$	\$	\$	\$
Combined total household income				\$

Expenses: Please detail all combined expenses	
Expense Type	Amount
Rent/Board/ Mortgage	\$
Household expenses (e.g. Rates, water, electricity, gas, phone, internet)	\$
Personal Expenses (e.g. vehicle, food, insurance, medical, dental, entertainment)	\$
Family Expenses (e.g. Childcare, child support, education, entertainment)	\$
Other (Please specify);	\$
Combined total fortnightly expenses	\$

Is there anything else that may impact your financial situation not covered above?