

Donation to Schools (Reimbursement) Application Form 2023-24

Form Preview

ELIGIBILITY

* indicates a required field

Important Information

To be eligible to apply for reimbursement applicants must read and agree to the following eligibility criteria:

- The applicant is a school located within the City of Cockburn.
- Reimbursement is for one or more of the following:
 1. Costs incurred for the supply and delivery of sand (excluding GST) for school use, up to a maximum of 6m³ per calendar year.
 2. The cost of one bus trip (excluding GST) per calendar year to transport students to the annual inter-school sports day.
 3. The cost of a maximum of 20 trees and shrubs (excluding GST) per calendar year up to a total value of \$200.
- Reimbursement of funds will be made once the applicant has provided a copy of the **invoice and receipt/proof of payment**.
- Funds will be reimbursed by direct deposit into your nominated bank account.

For assistance contact the Administration Support Officer (Community Services) on 08 9411 3444 or sfarr@cockburn.wa.gov.au

I agree that I have read and meet the eligibility criteria *

☐ Yes ☐ No

If no, you are not eligible to apply for reimbursement.

Previous Funding

Has your school received grant funding or reimbursement from the City of Cockburn in the past 12 months? *

☐ YES ☐ NO

If yes, please provide details including date, purpose and amount.

Please include dates and amounts.

APPLICANT AND REQUEST DETAILS

* indicates a required field

Applicant Details

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School Name *

Organisation Name

School Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Contact Name *

First Name

Last Name

Position held at the school ***Contact Phone Number ***

Must be an Australian phone number.

Contact Email Address *

Must be an email address.

Reimbursement Request

Request type *

- ☐ Sand
☐ Bus hire interschool sport day
☐ Trees and shrubs

More than one choice can be selected

Total Amount Requested *

\$

Must be a dollar amount.

What is the total amount of the reimbursement you are requesting?

Please upload your invoices and receipts *

Attach a file:

The application can't be processed without the receipt

Bank Account Details

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If your request is successful, funds will be provided via electronic transfer (EFT). Please provide the following details:

School Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

CERTIFICATION AND SUBMISSION

* indicates a required field

Certification

This application must be submitted by an authorised person e.g. School Principal on behalf of the applicant. This person may be different to the contact person listed earlier in the application.

- I am authorised by my school to complete and submit this application form.
- I certify that to the best of my knowledge all of the information supplied in this application is true and correct.
- I will notify the City of Cockburn of any change to the information supplied and any other information or circumstances arising that may affect this application.
- I understand that this is an application only and may not necessarily result in approval.
- I understand that any decision made by the City of Cockburn is final and is not subject to an appeals process.

Please fill in your details below as your endorsement of this application and the statements above.

I have read and agree to the above certification statements *

☐ Yes

Authorised Person's Name *

First Name

Last Name

Position held in the group *

Contact Number *

Must be an Australian phone number.

Date *

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Must be a date.

Privacy Notice

The City of Cockburn will use any information provided for the purpose of processing your application and for remaining in contact with you.

The City of Cockburn (the City) collects, uses and discloses personal information in accordance with the City of Cockburn Privacy Management Policy. This Policy is consistent with key provisions of the Australian Privacy Principles under the Australian government's *Privacy Act 1988*. Click on link to view the [Privacy Management Policy](#).

Feedback

You are now at the end of the application process. Before you review your application and click the **submit** button, please take a few minutes to provide some feedback. This will help us to continually improve the application process for our customers.

Please indicate how you found the online application process: *

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60

Please suggest any improvements or provide comments.

Thank you for your application and your feedback.