

ACN: 166 697 669

ABN: 48 782 696 750



2 Marina Drive  
BURNETT HEADS QLD 4670  
PO BOX 537  
BUNDABERG QLD 4670  
Ph: 07 4159 5589

PCCC Port Curtis Coral Coast Trust Limited  
for the Port Curtis Coral Coast Aboriginal  
Peoples Charitable Trust Board

## **PRIORITY ONE: BACK TO SCHOOL EDUCATION PROGRAM**

### **2019 APPLICATION**

**Closing Date for all applications: Friday 1<sup>st</sup> February 2019**

***APPLICATIONS RECEIVED AFTER CLOSING DATE WILL NOT BE CONSIDERED***

Before completing and returning the form you must:

- Read and meet the PCCC Ltd Terms and Conditions (*see Attachment 1*).
- Ensure the entire application is completed by completing the Checklist on Page 4.
- Include your PCCC Trust membership Number OR if you are not a member, complete the Membership Application Form.

Please return your completed application via email to [reception@pccctrust.com.au](mailto:reception@pccctrust.com.au) or via post to Port Curtis Coral Coast Trust Limited, PO Box 537, Bundaberg QLD 4670

If you have any queries or require assistance to complete this form, please contact Port Curtis Coral Coast Limited office on (07) 4159 5589 or [reception@pccctrust.com.au](mailto:reception@pccctrust.com.au)

#### **APPLICANT INFORMATION (PARENT/CARER): Please print clearly and in capital letters**

Surname:		First Name:	
Street address:			
City:	State:	Post Code:	
Phone:		E-mail:	
<b>Postal address (If same as street address write 'AS ABOVE'):</b>			
City:	State:	Post Code:	
<b>FOR THE PERSON COMPLETING THIS FORM: Please indicate relationship to students listed on this form:</b>			
<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandparent <input type="checkbox"/> Carer <input type="checkbox"/> Other (please specify): _____			

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Planning for the future of PCCC People: Investing in Our Future through effective Education Programs for Our children:  
Respecting, Caring and Supporting Our Elders and Culture: Caring for Our Land and Sea Country: Working to create  
Economic Opportunities for PCCC People: Developing Best Practice Corporate Governance Standards for All PCCC  
Entities: Engaging with, and Listening to Our People

**PLEASE INDICATE THE PCCC GROUP OF THE STUDENTS ON THIS APPLICATION:**Gooreng Gooreng       Gurang       Bunda       Byellee **PLEASE INDICATE APICAL ANCESTOR OF THE STUDENTS ON THIS APPLICATION:**

<input type="checkbox"/> Dina	<input type="checkbox"/> Jessie	<input type="checkbox"/> Dolly (mother of Johnson Matemate)	<input type="checkbox"/> Molly Jones	<input type="checkbox"/> Dulhu/Doolan
<input type="checkbox"/> Buller Tolsen (Norman Buller)	<input type="checkbox"/> Nellie Murray (Also known as Nellie Watcho and Alice Murray)	<input type="checkbox"/> Jane	<input type="checkbox"/> Betsy	<input type="checkbox"/> Rosie
<input type="checkbox"/> Maggie Little	<input type="checkbox"/> Rosie Blackman	<input type="checkbox"/> Emma Jones (wife of John Broom/e)	<input type="checkbox"/> John Hill ("Pig Pig")	<input type="checkbox"/> Elizabeth Tanwatt/Daniels
<input type="checkbox"/> Kitty of Gladstone	<input type="checkbox"/> Margaret Grant			

PCCC Trust Limited Membership Number\*:

\* If you are not a current PCCC Trust Member, PCCC Ltd encourages you to complete the Membership form (see <http://www.pccctrust.com.au/programs/membership/>)**NOMINATED CONTACT: You may wish to nominate a person who can be contacted on your behalf in regard to your application. This person must be acquainted with the details of your application.**

Name of contact:	Relationship to you:
Phone:	E-mail:

**NOTIFICATION OF RECEIPT OF EDUCATIONAL ASSISTANCE FROM ANOTHER NATIVE TITLE GROUP, ENTITY, OR SCHOLARSHIP / BURSARY.**Does the parent /carer/child receive educational assistance from another native title group, or scholarship, bursary?       Yes       No

If Yes, please provide details of the assistance already received and the amount.

Name of Institution/Corporation/Trust

Amount: \$

**STUDENT/S DETAILS AND FUNDING APPLIED FOR:**

Please indicate which category of funding you are applying for and the total number of children you are applying for:

There are \_\_\_\_\_ listed on this form. (Please indicate number of children). **If applying for more than 4 students, please copy and attach extra page/s.**Support will be provided directly to third party suppliers (schools, stationary suppliers, etc.). Please outline how you wish the support to be allocated for each child's assistance in the "Funding Applied For" Section below.**For the Prep to Year 10 category, the allocation is up to \$300 per child.****For the Year 11 and 12 category, the allocation is up to \$500 per child.***For example, if you have one child in Year 9, you could allocate \$150 to school fees, \$80 to uniforms and \$70 to an Office Works Gift Card Voucher.*

**Student Number 1**

First Name:		Surname:	
Date of Birth:	Age:	Gender:	Year Level at School:
Name of School:		School Suburb:	
<b>Funding Applied For:</b>			
<input type="checkbox"/> School Fees	Name of School:	Amount:	
<input type="checkbox"/> Uniform	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Stationery/Book List	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Office Works Purchase Order		Amount:	
		TOTAL:	

**Student Number 2**

First Name:		Surname:	
Date of Birth:	Age:	Gender:	Year Level at School:
Name of School:		School Suburb:	
<b>Funding Applied For:</b>			
<input type="checkbox"/> School Fees	Name of School:	Amount:	
<input type="checkbox"/> Uniform	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Stationery/Book List	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Office Works Purchase Order		Amount:	
		TOTAL:	

**Student Number 3**

First Name:		Surname:	
Date of Birth:	Age:	Gender:	Year Level at School:
Name of School:		School Suburb:	
<b>Funding Applied For:</b>			
<input type="checkbox"/> School Fees	Name of School:	Amount:	
<input type="checkbox"/> Uniform	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Stationery/Book List	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Office Works Purchase Order		Amount:	
		TOTAL:	

**Student Number 4**

First Name:		Surname:	
Date of Birth:	Age:	Gender:	Year Level at School:
Name of School:		School Suburb:	
<b>Funding Applied For:</b>			
<input type="checkbox"/> School Fees	Name of School:	Amount:	
<input type="checkbox"/> Uniform	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Stationery/Book List	Name of Supplier:	Amount:	
	Name of Supplier:	Amount:	
<input type="checkbox"/> Office Works Purchase Order		Amount:	
		TOTAL:	

CHECKLIST	TICK IF COMPLETE
1. APPLICATION COMPLETED IN FULL	<input type="checkbox"/>
2. PCCC TRUST MEMBERSHIP NUMBER DETAILS	<input type="checkbox"/>
<b>OR</b> COMPLETED PCCC TRUST MEMBERSHIP APPLICATION FORM	<input type="checkbox"/>
3. INVOICE/S ATTACHED	<input type="checkbox"/>
• Stationery Invoice	<input type="checkbox"/>
• Uniform Invoice (shorts/shirt/hat/shoes/socks/backpack)	<input type="checkbox"/>
• School Fee Invoice	<input type="checkbox"/>
4. SUPPLIER DETAILS COMPLETED	<input type="checkbox"/>
5. LATEST REPORT CARD ATTACHED OR CONFIRMATION OF 2019 ENROLMENT	<input type="checkbox"/>
<b>Please Note:</b>	
<ul style="list-style-type: none"> <li>• <b>If the above documents are not provided your application <u>will not</u> progress.</b></li> <li>• <b>Once the application form has been completed in full and all required documents have been attached, please sign and date the declaration below.</b></li> </ul>	

**PARENT/GUARDIAN DECLARATION:**

I declare that I am the parent/carer/grandparent for the above listed students.

I / WE declare that the information I have provided on this form is complete and accurate and that the application meets the PCCC Ltd Trust terms and conditions 2019.

I / WE accept and agree to the Terms and Conditions as outlined in this application.

I / WE understand that my application will be considered at the next meeting of the Trust Board of Directors.

I / WE understand and accept that the Directors decision to approve or not approve this application is final.

I/WE understand that I may be requested to provide additional information.

I/WE understand that if I provide false or misleading information I may be precluded from obtaining future PCCC Trust assistance.

\_\_\_\_\_  
Name of Applicant:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Name of Contact Person:  
(Optional)

\_\_\_\_\_  
Signature of Contact Person

\_\_\_\_\_  
Date:

**Attachment 1.****BACK TO SCHOOL EDUCATION PROGRAM**  
**TERMS AND CONDITIONS****OBJECTIVE:**

The intent of the “*Back to School Pack Assistance Program*” is to provide assistance to *Port Curtis Coral Coast Native Title Claimant* families or carers, who have children attending School, from Prep through to Grade 12, with the purchase and/or payment of school fees, school uniforms and school materials such as stationery and textbooks. You must agree to the Terms and Conditions listed above for this application to be forwarded to PCCC Ltd for consideration. Your signature is to be recorded on the last page of this application.

**1. FUNDING AVAILABLE**

**Prep to Year 10** (Primary & Lower Secondary School) – Back to School Support Program – **up to \$300 (GST inclusive) per student.**

**Year 11 to Year 12** (Secondary School) – Back to School Support Program – **up to \$500 (GST inclusive) per student.**

No direct cash payments will be made to the Family or Carer. Any amount not spent will not be refunded to the parents and or carers. PCCC is not responsible for any amount above the financial assistance of up to \$300.00 (GST inclusive).

**2. SUPPLIERS [NO CASH PAYMENTS ARE MADE ON THIS PROGRAM]**

Support will be provided directly to 3<sup>rd</sup> parties, i.e. schools, book pack suppliers and stationery stores. Upon the completion of a registration form, approval will be given to an approved preferred supplier, selected by the PCCC Ltd, for the parent or carer, to collect the school material i.e. stationery and textbooks, school uniform.

**3. PROOF OF ENROLMENT**

Families or carers wishing to access this assistance must provide proof of school enrolment as a part of the registration process. This information will not be stored or collected by PCCC, or our suppliers. Acceptable documents include 2018 Last Semester/Term School Report Card, 2019 confirmation of enrollment letter on school letterhead.

**4. PROCESSING**

Following the consideration of your application, you will receive a letter from PCCC Ltd to notify you of the outcome. Please do not contact any suppliers until you have received formal PCCC Ltd advice of approval.

**Successful Applicants**

You will receive a letter that will include details of the decision, an Acceptance of Conditions Form and details regarding your provision of school supplies and how to collect them, or payment of approved school invoices.

**Unsuccessful Applicants**

You will receive a letter advising of the decision and details of why the application was not successful.