Youth Access Grant: Get Involved Application Form 2026/27

Form Preview

Introduction

Before Completing this application

1. Please refer to the Youth Access Grant Guidelines
2. This application can only be completed by a parent or carer if the intended beneficiary of the grant is aged between 12 and 17 years of age.
3. If required, discuss your project with the grant contact, Daniel Fry daniel.fry@portphillip.vic.gov.au or call 03 9209 6777

Completing the application

- Save regularly to avoid losing your work you can return and work on the application any time prior to submission.
- Navigate the form by clicking **Next Page** or **Previous Page** or using the index list.
- Having trouble answering a question? Look below each question for hints to help you answer the question.
- If submitting multiple applications, consider having general information e.g. description about your organisation in a word document to cut and paste into each application.
- When you submit the application, you will receive a confirmation email with a PDF copy of the submitted application.
- After submission, changes can not be made to the application.
- After submission, you can also return to **https://portphillip.smartygrants.com.au** at to view a copy of the submitted application.

Documentation required to be uploaded in this form:

Proof of age • Proof of age is required with the application to demonstrate the intended beneficiary is aged 12 to 18 years. This can include a birth certificate, passport, driver's licence or proof of age card.

Live, work, study or recreate in the City of Port Phillip • At least one document that demonstrates the recipient lives, works, studies or recreates in the City of Port Phillip. This could include evidence of the parent or carer's proof of residence.

Eligibility

* indicates a required field

Eligibility Checklist

Is the beneficiary aged between 12 to 18 years (at the time of application) *

○ Yes ○ No

Note: A parent or carer must complete and submit the application if the intended beneficiary is aged 12 to 17 years. If the application is successful, the parent or carer will also be responsible for

managing the funds and completing an acquittal report. An organisation cannot submit an application or manage a grant on behalf of an individual.

Does the beneficiary live, work, study or recreate in the City of Port Phillip? *
○ Yes ○ No

If you answered **No** to any of the above eligibility questions, please do not proceed with this application. If you have any further questions, please reach out to the grant contact daniel.fry@portphillip.vic.gov.au.

Child Safe Standards

The City of Port Phillip has zero tolerance for child abuse. We are a committed Child Safe organisation, ensuring that a culture of child safety is embedded into our practices and processes. Every child accessing Council services has the right to feel and be safe. This City embraces diversity and inclusion. Children of all age, gender, race, religion, disability, sexual orientation, family background and social background have equal rights to protection from abuse. All City of Port Phillip Councillors, employees, volunteers, contractors and community representatives must understand and act to prevent, detect, respond to and report any suspicions of child abuse, and maintain a child safe culture.

All grant applications that work directly with children and young people that are not compliant with the Victorian Child Safe Standards or be actively working towards compliance to the satisfaction of the Commission for Children and Young People, will not be eligible to receive funding under the Youth Access Grants Program. For more information on the Victorian Child Safe Standards please refer to the above link.

Applicant Details

* indicates a required field

Applicant (parent/carer)
First Name Last Name

Applicant Home Address
Address

Applicant Mobile Phone Number
Must be an Australian phone number.

Applicant Personal Email
Must be an email address.

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Beneficiciary name (young person)

Title | First Name | Last Name

What is the age of the beneficiary at time of application? *

- ○ 12
- ○ 13
- ○ 14
- ○ 15
- ○ 16
- ○ 17
- ○ 18

Please tick any of the following categories that apply to the young person/ beneficiary: (optional)

- ☐ experiencing financial disadvantage
- ☐ living in social/public, or community housing (including transitional housing)
- ☐ from First Peoples background
- ☐ from a culturally and linguistically diverse (CALD) background
- ☐ living with disability
- ☐ gender diverse/non-binary
- ☐ Other:

Recreation Activity Details

* indicates a required field

Brief description of the activity young person will participate in: *

Word count:

Must be no more than 30 words. Please provide a brief description that if successful we can use it to promote your project. Please include: who, what, where and when in this description.

Where will the proposed activity take place? *

- ☐ Online
- ☐ Albert Park / Middle Park
- ☐ East St Kilda / Balaclava
- ☐ Elwood/ Ripponlea
- ☐ Port Melbourne
- ☐ South Melbourne
- ☐ St Kilda Road Neighbourhood
- ☐ St Kilda
- ☐ Whole of Port Phillip
- ☐ Other:

If your project is taking place outside of the municipality please type the suburb in 'other'

Activity Start Date *

Must be a date and no earlier than 1/4/2027.

Activity End Date *

Must be a date and no later than 30/9/2027.

Describe the need for the young person to participate in this activity? *

Up to 100 words. What are the current barriers faced? Why are they interested in this activity?

What are the two main expected benefits for the young person? *

up to 100 words

Project Budget

Grant Request

Your activity **income** budget will include details of all proposed activity income e.g. City of Port Phillip (CoPP) Grant, in-kind contribution, fundraising etc.

Applicants will then specify the items of **expenditure** allocated towards the activity (please add "City of Port Phillip" beside all expenditure items the grant will be used for).

Income and Expenditure columns should equal the same value.

There are many resources that can help you with writing a budget including The Funding Centre

An example of a grant budget is available on our website

Budget

Income	$	Expenditure	$
	$		$
	$		$
	$		$

Budget Totals

Total Income Amount

$

This number/amount is calculated.

Total Expenditure Amount

$

This number/amount is calculated.

Income - Expenditure

$

This number/amount is calculated.
This should equal 0

Documentation

* indicates a required field

Please upload proof of age documentation to demonstrate the intended beneficiary is aged 12 to 18 years *
Attach a file:

This can include birth certificate, passport, driver's licence, or proof of age card

Please upload at least one document that demonstrates the beneficiary lives, works, studies or recreates in the City of Port Phillip. *
Attach a file:

This could include evidence of the applicant, parent or carer's proof of residence (bank statements, utility bills, or rental receipts etc)

Declaration

* indicates a required field

I certify that all details supplied in this application form and in the attached documents are true and correct to the best of my knowledge. I have read the Youth Access Grants Program Guidelines and understand the information contained within it forms part of the conditions of payment if this application is successful. I agree to contact the City of Port Phillip in the event that any information regarding this application changes or is found to be incorrect.

Declaration of Applicant *

Title | First Name | Last Name

A parent or carer must complete this section if the intended beneficiary is aged 12 to 17 years. If the application is successful, the parent or carer will also be responsible for managing the funds and completing an acquittal report.

Do you agree with the above statement *

○ I agree

The personal information requested on this form is being collected by the council for the Youth Access Grants Program. The personal information will be used solely by the council for that primary purpose or directly related purposes. If this information is not collected the application will not be considered eligible, and therefore will not be considered during the assessment process. The applicant understands that the personal information provided is for the verification of Youth Access Grants Program application and correspondence purposes and that he or she may apply to the council for access to and/ or amendment of the information.

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Applicant Feedback

* indicates a required field

How did you hear about the Youth Access Grants Program? *

- ☐ School / Community Organisation
- ☐ Council officer
- ☐ Word of Mouth
- ☐ Email / Newsletter from City of Port Phillip
- ☐ Youth Services e-Bulletin
- ☐ Social Media
- ☐ Other:

How can Youth Access Grants Program be improved?

Word count:

Must be no more than 50 words.

Any other comments?

Word count:

Must be no more than 50 words.