

Tool

Ministry Candidate Support Grant Application

TOO-PEO-25

Section A: Personal Details		
Family Name	First Name	
Address	City/Suburb	
State	Postcode	
Phone	Email	
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Section B: Education or Candidature F	Program Details	
University	Course Title	
Number of Subjects being undertaken	Proposed Year of Completion	
Supervised Ministry Placement	Location of Supervised Ministry Placement	
Section C: Current Financial Status Do you have any other study loan		Yes No
Have you sought any Centrelink assista	ance	Yes No
Have you sought any support from you	ur Presbytery	Yes No
Have you previously accessed the Min	istry Candidate Support Grant?	Yes No
Section D: Request for Financial Repo	rt	
Requested Amount (whole dollars)	\$	
experiencing for your monthly living n	sted amount. You must provide evidence of the eeds or the cost of the specific item or service is insufficient, please attach additional page(for which the grant is

Section E: Disposable Income

Please declare your net income and expenses per month below. Your net household income is to include any money brought into the household by a spouse/partner. The grant determined will be based only on the actual figures included in the table below:

come (per month) Amount (\$) Expenses (per month)		Amount (\$)	
Centrelink payments, allowances, benefits	\$	Course books, materials, stationery etc	\$
Full-time or part-time employment	\$	Travelling costs, e.g. fares and/or petrol	\$
Vacation employment	\$	Vehicle maintenance costs	\$
Scholarships	\$	Relocation costs for the purposes to study	\$
Investments	\$	Rent/house repayments	\$
Partner income	\$	Groceries	\$
Other family support	nily support \$ Dining out, entertainment etc		\$
Other assistance (please list)	\$	Utilities - gas, electricity, water etc	\$
	\$	Telephone, mobile, internet etc	\$
	\$	Medical, dental, chemist etc	\$
	\$	Personal expenses – clothing, devices etc	\$
	\$	Other expenses (please list)	\$
Total Income (A)	\$	Total Expenses (B)	\$
Disposable Income (A-B)		\$	

You must provide copies of the following documents. Please check and (tick) the box showing you have attached the required documentation:

Documents	Tick
Proof of identification – copy of driver's licence or student card if a new ministry candidate	
A completed budget and if required evidence of the cost of the item or service for which the grant is sought (e.g. attach a quote)	
Proof of source of income (e.g. Centrelink documentation, pay slips, employment records, partner income evidence, other financial support)	
Bank account details including account name, BSB and account number	

Section F: Applicant Declaration

You must acknowledge and (tick) the statements below for your application for the grant to be considered:

Declaration	Tick
I have attached the required documentation. I acknowledge that my application will not be	
assessed until the required documentation is attached.	
I consent to the validation and review of my academic and supervised ministry placement	
progress with Trinity College Queensland (TCQ) to enable the consideration of my application	
for the grant.	
In my opinion, I am making satisfactory progress in my academic and supervised ministry	
placement and have satisfactorily completed all required assessments in the time frame Trinity	
College Queensland requires.	
I declare that the receipt or expenditure of the funds requested is consistent with legal	
obligations and my previous declarations that I have made to TCQ.	
I declare that the information provided in this application for the grant is accurate and	
complete. I acknowledge that providing incorrect information or withholding information	
relating to my application may result in delay in processing or result in a decision based on the	
information I provided in this application.	

Applicant's signature	
Date	



Section G: Privacy

Privacy: Details regarding the collection, use, disclosure and access of personal information from this application are provided in the Synod's Privacy Policy available at: www.ucaqld.com.au/administration/policies.

Information provided in this form will be used to assess your eligibility for the Grant. Insufficient or incorrect information may affect your application.

Please send your completed application form marked "Confidential", Application for Ministry Candidate Support Grant, Attention: Manager, People & Culture, Queensland Synod office, Queensland, GPO Box 674, Brisbane, Qld 4001.

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Section H: Dean of Formation and Dispersed Learning's Declaration

Dean of Formation and Dispersed Learning or their nominee, is to tick the statement below to verify the applicant may be considered to receive the grant.

On behalf of the faculty, I verify that the applicant is making satisfactory progress in her/his academic and supervised ministry placement and has satisfactorily completed all required assessments in TCQ's required time frame.

Detail any other information about the applicant's performance at TCQ that the Manager People and Culture should be aware of:

Signed by:

Date:

Section I	: [Determin	ation o	fΑ	ppl	icati	ion
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Manager.	People and	Culture is to	tick the	sections	below to	o indicate	the result	of the ap	plication

It has been determined to recommend to:					
Approve/Decline your request for t	he Ministry Candidate Support Grant				
Approve your request effective as o	of				
	t				
	to be processed to your nom				
Section J: Application Processing S	ign Off				
Received by		Date			
Processed by		Date			
Recommended by (Manager People & Culture)		Date			
Approved/Rejected by (General Secretary)		Date			
Applicant Advised by (Manager People & Culture)		Date			
Notes to Finance for funding process	sing:				

Document	number	TOO-PEO-25			
Version	Approval date	Approved by	Effective date	Document owner	Document contact
1.0	01.08.2015	Board of Christian Formation	08.09.2015	Irene Waters	Irene Waters
1.1	27.08.2018	Executive Leadership Team	01.07.2018	Satya Swami	L&D Officer
Next sched	Next scheduled review 01.06.2025				