

Cardinia Shire Council  
**VOLUNTEER TRAINING**  
 Subsidy application form



This form is to be completed by the training provider on behalf of the training subsidy applicant accompanied by an invoice to Council for the term training subsidy payment. Applications will be collected by Council at the end of each term. Please note payment of the remainder of the course fee is required by the applicant and is to be paid directly to the training provider when requested.

**Training applicant details**

Name of applicant			
Postal address			
Phone		Email	

**Volunteer organisation details**

Name of volunteer organisation and position held	Role/Position held:
Contact person	
Phone	

**Training package details**

Course name	
Training provider	
Course dates	

**Authorisation**

_____ Name of training applicant	_____ Signature	_____ Date
_____ Name of training provider	_____ Signature	_____ Date

**Please mail completed training forms and invoice to Cardinia Shire Council at the end of each term.**

**Privacy statement**

Personal information (such as an individuals name, telephone number, address or email) contained in the completed application form is being collected and will be used by Council for the purposes of its Volunteer Training Programs. The personal information may be made available to members of Council staff or Councillors involved in the evaluation of this program. It may also be stored on a Council database of volunteer training subsidy applicants. Such personal information will only be disclosed beyond Council with the relevant individuals consent or where required permitted by law.