

3.2 Cultural Recording

This program provides up to \$500 per day / \$250 per half day for expenses related to cultural recording activities.

Need help with this form? Freecall 1800 014 401

Returning this form

Email: applications@ibngroup.com.au
Post: PO Box 2390, South Hedland, WA, 6722
Fax: (08) 9140 0998
In person: 3 Brand Street, South Hedland
973 Central Road, Tom Price
Unit 3, 4 Welcome Road Karratha

Benefits, exclusions and conditions

Refer to the Community Programs Handbook or visit ibngroup.com.au

Required documentation

See 'Attachments' check box. Applications cannot be processed until all required documentation is provided.

Processing time

3-5 working days once all required documentation is received.

IBN Community Member applying for assistance

1 Mr Mrs Miss Ms Other

Snr Jnr

First given name

Second given name

Last name

2 Have you been known by any other name?

No

Yes ▶ Provide name

3 Your date of birth

4 Your gender

Male

Female

5 Language group

Yinhawangka

Banyjima

Niyiyaparli

6 Mobile phone number

(to be used to advise you of the progress of your application)

7 Email address

8 Current home address

Postcode

9 Is your current address the same address you registered with IBN?

No ▶ You will need to complete an 'Update personal details form' and attach it to this application.

Yes

10 IBN supports the recording of language, knowledge of land and other cultural heritage of the IBN people. Please describe the activity to be funded?

Fees requested

11 Full day recording (\$500)
Half day recording (\$250)

Other assistance requested (if relevant)


12

Expense 1	Name of supplier to be paid	Amount required
		\$ <input type="text"/>
Expense 2	Name of supplier to be paid	Amount required
		\$ <input type="text"/>
Expense 3	Name of supplier to be paid	Amount required
		\$ <input type="text"/>
Expense 4	Name of supplier to be paid	Amount required
		\$ <input type="text"/>
Expense 5	Name of supplier to be paid	Amount required
		\$ <input type="text"/>

15 Applications must be approved by the IBN Language, Culture and Heritage Coordinator.

Name of Language, Culture and Heritage Coordinator
Signature
Date
<input type="text"/>

Attachments

13  To enable IBN to assess your application quickly and accurately you must provide the following documents when submitting your application.

Supplier quotes/invoices including supplier payment details

*Evidence of Australian Business Number (ABN) or Statement by a Supplier (*IBN will advise once your application is received if these documents are required*)

Declaration

14 I declare that:

- the information I have provided in this form is true and correct.
- the assistance requested is for my own use.

I agree to:

- my information being shared with or checked by other organisations for application assessment purposes.

Signature

Date

Office use only

Date received CP#

Received by

IBN Corporation Pty Ltd | ACN 093 140 240