



Who should complete this form?

- Ex-service organisations and community organisations applying for Veterans' Health Week (VHW) funding
- Ex-service organisations and community organisations that don't require VHW funding and would like to have their event registered on the [DVA VHW website](#).

Applications must:

- Support the yearly VHW theme
- Be held within the relevant DVA VHW date period
- Be completed online and submitted by email to [vhw@dva.gov.au](mailto:vhw@dva.gov.au)
- Be received by DVA prior to the application closing date.

If you need to include additional information, please provide this content as a separate attachment and indicate the relevant question number. DVA will not accept handwritten applications, applications received by post or applications received after the closing date. If you are holding multiple events, please complete an application form for each event.

**PLEASE NOTE:** your application will be returned if parts are not completed or further information is required.

Refer to the DVA VHW website for further information [www.dva.gov.au/vhw](http://www.dva.gov.au/vhw)

If you have any questions regarding the completion and submission of the form, please contact the DVA VHW National Coordinator on **1800 838 372** or email [vhw@dva.gov.au](mailto:vhw@dva.gov.au)

Prior to submitting your application, please do the following: read the VHW Funding and Registration Guidelines (applicable to all events).

---

#### Privacy notice

Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by the Department of Veterans' Affairs (DVA) for the delivery of government programs for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

[Read more: How DVA manages personal information.](#)

**PART A****Applicant Details**

1. In which State or Territory will your VHW event be held?
2. How many applications will your organisation be submitting?

**Organisation Details**

3. Organisation name
4. Street address  POSTCODE
5. Postal address  POSTCODE
6. Website
7. Email
8. Have you held a VHW event before? No  Yes  Unsure

**PART B****Event Details and Contact Person**

9. Contact person for your VHW event PLEASE NOTE: this information will be posted on the DVA VHW website if your event is a public/limited access event, and you may receive calls from the media who wish to attend your event.  
Phone/mobile/email contact information must be provided.
10. Title (Mr, Mrs etc.)
11. Surname
12. Given name(s)
13. Role/position
14. Phone [  ] Mobile
15. Email

## Event information

16. Event title

17. Describe your event for the DVA website in 20 words or less

  
  
  

18. Will your event comply with the Government COVID-19 restrictions in your State or Territory?

No  Yes **Reminder: Your event must be held during VHW.**

19. Which date(s) will your event run?

20. Event address/location details

  
  
  

POSTCODE

21. Event requirements

(Do participants need to bring anything?)

  
  
  

22. Event time

START  :  FINISH  : 

23. Event zone

 Metro  Regional  Rural

24. Federal Electorate (for event location)

25. How many veterans &amp; veteran groups do you expect are likely to attend your event.

TOTAL 

26. Access

 Open to all  Limited numbers  Restricted activity

27. If limited numbers or restricted, please explain why

  

28. Please provide a RSVP date for the VHW website for limited number events

 /  / **PLEASE NOTE: an event listing will be posted on the DVA website.**

29. Would you be agreeable to DVA and/or the local MP/Ministry representative attending your event?

No  Yes

**PART C****Financial Details**

If applying for VHW funding, please complete **Part C**. If NOT, please continue to **Part D**.

**Organisation's financial details****30. Organisation ABN**

PLEASE NOTE: if an ABN is not available please provide a Statement of Supplier form available from the ATO website if not already provided to DVA.

**31. Name of bank or financial institution****32. Account name****33. Account BSB****34. Account number****VHW Budget and Funding****35. Financial expenses (your out-of pocket expenses)**

DVA will fund \$720 (GST incl.) towards the cost of each approved event. If your event will cost more than \$720 these additional costs must be covered by your organisation.

Make sure you read the VHW funding and registration guidelines as there are some items that DVA will not fund.

PLEASE NOTE: the total must not exceed \$720 (incl. GST).

**Total funding requested****PART D****Declaration****36. Are there any conflicts of interest that may occur from submitting this application?**No  Yes 

Please read and complete the following declaration.

This declaration must be completed by an authorised representative of the organisation. If applying for funding, this should be a person who is authorised by their organisation.

I declare the following:

- The information provided in this application form is true and correct.
- If and where any personal details of a third party are included, the third party has been made aware of, and given permission for those details to appear in this application.
- I have read, understood and will comply with the VHW Funding and Registration Guidelines (all events).

I understand and agree to the declaration above.

**37. Full name of authorised representative****38. Position of authorised representative****39. Date**

Please send completed form and referral to: [vhw@dva.gov.au](mailto:vhw@dva.gov.au) by clicking on the email button below.