



GUMALA ABORIGINAL CORPORATION

3.0

COMPUTER SUPPORT PROGRAM

Application Form

NAME: _____

ADDRESS: _____

DOB: _____ / _____ / _____

MOBILE: _____

HOME: _____

FAX: _____

EMAIL: _____

Language Group: Banyjima

Innawonga

Niyaparli

PURPOSE THE COMPUTER WILL BE USED FOR: (e.g. studying: tertiary education, highschool, primary school, etc)

INFORMATION ON COSTS:

Total cost of computer (including software, etc)	\$
Member to contribute minimum 10%	\$
GAC contribution (maximum \$1800)	\$
TOTAL	\$

INTERNET ACCESS:

GAC maximum contribution \$350 (per financial year, not available to primary or high school students)	\$
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Have you received help or contributions towards this request from anyone else?

(e.g. IBN, MIB, other organisations, Personal contribution, etc)

YES

NO

SUPPLIER DETAILS:

COMPANY NAME	PHONE #	FAX #

Ask supplier their preferred payment method (for new suppliers only)

Bpay

Credit Card

Direct Deposit

Account

Please Note:

Your application will be processed within 7 days once all paperwork has been received.

Signature: _____

Date: _____

Forward completed applications to:

Fax: 08 9188 1846

Email: gac@gumala.com.au

Office Use Only

Date received: _____	By: _____
Comments: _____	
Date processed: _____	By: _____
Comments: _____	