National Partnership Agreement on Remote Indigenous Housing NSW Employment Related Accommodation (ERA) Program

- APPLICATION FORM-

Personal Details:

| First Name: | | | Last Name: | | | |
|-----------------------------------|------|---|----------------------------|-----------|--|--|
| Date of Birth: | | | | | | |
| Postal | | | | _ | | |
| Address: | | | Postcode: | Postcode: | | |
| Street or Residential | | | | _ | | |
| Address: | | | Postcode: | | | |
| Telephone | | | Mobile: | | | |
| Email Address: | | | | | | |
| | | syment Details:) or b) as it relates to your Pro | ogram applicatio | on) | | |
| a) Name of Education Institution: | | | b) Name of employer: | | | |
| Degree/ Cours | se | | Type of Jo | ob: | | |
| Intended Start Date: | | | Intended S Date: | Start | | |
| Expected cou duration: | ırse | | Expected employmeduration: | ent | | |
| | | | Employer' Phone Number a | | | |

email address

| ⇗ | or | × |
|---|----|---|

| 1. | Aboriginality: | I have attached evidence that I am a person of Aboriginal or Torres Strait Islander background from one of the following approved organisations: (see http://www.aho.nsw.gov.au for relevant forms and more information on proof of evidence) Aboriginal or Torres Strait Islander Association recognised under the NSW Aboriginal Councils & Associations Act 1976 Aboriginal Land Council Incorporated Aboriginal or Torres Strait Islander community organisation Statutory Declaration (with supporting documentation of acknowledgement from a Registered Aboriginal organisation e.g. Aboriginal Medical Centre) | |
|----|---------------------|--|--|
| 2. | 18 Years or older: | I am/ will be 18 years or older at the commencement of the course/ employment: Yes No* (see below) *Applicants under 18 years of age may be considered on a case by case basis. | |
| 3. | Remote: | I have a connection to a remote location Yes No The location I have a connection to is: | |
| 4. | Full-time | I have attached evidence that I: A) am enrolled in an educational course at the above listed educational institution OR B) have accepted a job offer with the employer listed above Yes, proof attached No (Provide evidence: confirmation of course enrolment or employment letter of offer). | |
| 5. | Living arrangements | I am applying for: Family accommodation Single shared accommodation | |
| 6. | Willingness | I am willing and have the capacity to live in shared student-type accommodation (singles only): Yes No I am willing and have the capacity to live with people of the opposite sex if required (singles only). Yes No I am willing and have the capacity to be responsible for keeping the house clean, tidy and in good condition, including the furniture: Yes No | |

| Any other reasons why your application for should be prioritised: Additional information attached: Yes No | | | | |
|--|-------|--|--|--|
| reasons why your application for should be prioritised: Additional information attached: Ensure that you have attached copies of your Proof of Aboriginality and Proof of Enrolment or Proof of Employment to your application. You may also have additional information to attach to your application to support your claim for prioritisation at point 8 (above) or for other purposes. If so, please indicate below: | 7. | Program | fulfil my requirements as a Program tenant: | |
| Additional information attached: Proof of Enrolment or Proof of Employment to your application. You may also have additional information to attach to your application to support your claim for prioritisation at point 8 (above) or for other purposes. If so, please indicate below: Yes The information relates to: To the best of my knowledge all the above information is true and accurate: Signed: Date: | 8. | reasons why your application for should be | (Optional) | |
| Signed: Date: | 9. | information | Proof of Enrolment or Proof of Employment to your application. You may also have additional information to attach to your application to support your claim for prioritisation at point 8 (above) or for other purposes. If so, please indicate below: Yes No | |
| • | | · | _ | |
| Print Name: | Signe | eu | Date | |
| | Print | Name: | | |

ERA Program Terms and Conditions

The purpose of the NSW Employment Related Accommodation (ERA) Program is to assist Aboriginal people with a connection to a remote area (hereafter referred to as a Program tenant), to undertake education and/or employment in a regional centre.

Program tenants must provide evidence of enrolment in an educational or training course, or proof of employment offer, in order to be eligible to rent a property through the ERA program. Should they decide to leave university, TAFE or other training, and do not plan to return to study, or if their employment ceases they will no longer be eligible for the program and a 'Notice of Termination' will be issued to end their tenancy and vacate the property.

Once accepted into the Program, Program tenants are responsible for keeping to the terms and conditions of their Residential Tenancy Agreement. This typically involves:

- Paying weekly rent
- Contributing to the cleaning and general maintenance of the property
- Taking care of furniture and appliances
- Paying a rental bond, refundable upon satisfactory completion of the tenancy
- Paying excess electrical, gas and water usage charges for single shared accommodation as
 determined by the housing manager. Program tenants in family accommodation will be responsible
 for paying their own utilities bills.

Program tenants with issues concerning their tenancy should contact their housing provider. For issues regarding education or employment contact the education provider or employer. For other concerns, contact the Aboriginal Housing Office (AHO).

The Program tenant consents to information regarding their application being shared between Program stakeholders.

The Program tenant also agrees to the Housing Provider undertaking a reference check of their prospective employer or educational institution. An identification check will also be undertaken once the tenant is accepted into the Program.

Detailed Program conditions are available in the ERA Program Guidelines, which can be found at: www.aho.nsw.gov.au/era. For information about the managing housing provider, employer or educational institution please contact them directly.

As a Program Tenant I hereby accept and agree to the terms and conditions of the ERA Program as set out in the above document.

| Applicant Name (print): | _ |
|-------------------------|----------|
| Signature: | _ Date : |
| Witnessed by: | |
| Print Name: | |
| Signature: | Date |