CONFIDENTIAL

with your scholarship application.

Academic Scholarship Application Form

Mathematics Scholarship Application Form

Arts Performance Scholarships Application Form

Sports Performance Scholarships Application Form

Please note: Applicants for boarding bursaries do not complete this form. They must complete the Needs-based Boarding Bursary Application Form.

Parent/ Guardian Name/s:_

Student Name: _

I am applying for a

Source

APPLICANTS Please complete all sections prior to submission

While St Margaret's may award a small number of scholarships based solely on merit, for the majority of scholarships, preference will be given to those applicants who would greatly benefit from

a St Margaret's education, but who, without some financial assistance, would be unable to attend. If you require financial assistance for your daughter to attend St Margaret's, please complete this application for financial assistance and submit it

St Margaret's



APPLICATION

lal Assistance Scholarship

FINANCIAL ASSISTANCE

Please detail any financial assistance available or applied for; include any separate income available to the child/ren (e.g., Youth Allowance, scholarship, grandparents, other relatives, community group grant etc).

OTHER FINANCIAL INFORMATION

(1) Do you or your child/ren hold shares or units in a private or public company or a discretionary or unit trust?

YES / NO

Amount

(2) Are you a beneficiary (either capital or income) in a discretionary or unit trust? (include any income from these sources on the next page).

Details

YES / NO

BURSARY INFORMATION – FINANCIAL SUMMARYMOST RECENT FINANCIAL YEAR

Please complete all sections prior to submission

Income: Family Gross Income and Support (fortnightly):

Description	Amount each fortnigh	ıt
Salary/wages		
Government support (including Family Tax Benefit)		
Child Support Payment		
Other income		
Total Family Gross Income and Support (fortnightly):		(a)
Deductions: Fortnightly:		
Description	Amount (fortnightly)	
Tax		
Mortgage/rent		
Utilities (gas, electricity, phone etc)		
Food		
Car expenses		
Other		
Total family deductions (fortnightly):		(b)
Net: (Disposable) Income (fortnightly): (after above deductions)		(a-b)
Amount available for school fees and related school costs: (fortnightly):		-
Summary of capital assets:		•
Description	Amount	
House		
Contents		
Motor vehicles		
Investments/savings		
Shares		
Other		
Please complete all sections prior to submission		

St Margaret's



cial Assistance Scholarship

St Margaret's

FINANCIAL ASSISTANCE APPLICATION

COMMITMENT

the school year.

Please explain your reasons for needing financial assistance. Be sure to include any special circumstances or unusual expenses.



ssistance Scholarship

I/We hereby make an application for tuition fee assistance for the coming year. This application has been completed

In the event this application results in a reduction of school fees payable I/we agree and accept the following conditions:

To advise the School of any change in financial circumstances that may occur during the term of a bursary.

To pay the agreed assessed fee via the Methods of Payment listed in the Domestic Fee Schedule over

conscientiously believing that all details contained herein to be true and correct.

I/We declare that I/we have disclosed all sources of income and support and that this application represents a full and complete disclosure of my/our family's financial position, is true and correct in every particular, and is submitted in support of this application without reservation or exception.

I/We have attached my/our most recent Taxation Return, Statement of Income from Centrelink and/or all other supporting documents.

I/We realise that an improvement in circumstances may result in a change in financial assistance. I/We further understand that a failure to disclose all income or to notify of improvements in financial position may result in the termination of the bursary.

I/We understand that in the event that a debt collection agency is required to be employed for the collection of an overdue account that I/we will be liable for collection costs incurred, if any.

I/We understand that application for, and award of, a Scholarship are confidential transactions between St Margaret's Anglican Girls School and the applicant.

Signed:	(Parent/guardian (1		Date:	_ /	_ /	-		
Signed:	(Parent/guardian (2		Date:	_/	_/	-		
Witness	to signature(s):	 				Date:	_/	_/
Witness	name in full:							
Address	of witness:	 						

Please complete all sections prior to submission and ensure all relevant documents are attached. Scholarship applications cannot be processed until all documentation is received and signatures are applied.

OFFICE USE ONLY		
Date received: / /	Approved Y/N Amount: \$	Recommended Y/ N
Documentation correct: Y / N	Sign Accountant:	Sign Business Manager:
	Date://	Date://