



Needs-Based Bursary APPLICATION

APPLICANTS *Please complete all sections prior to submission*

Parent/guardian (1): _____ Parent/guardian (2): _____

Postal address: _____

Home phone: _____ Work phone: _____

Total number of dependent children in family: _____

STUDENTS

Please enter names of ALL children in your family and indicate for whom you are requesting a bursary with an asterix (*). If insufficient space please attach an additional sheet.

Surname: _____ Given name/s: _____ Current year group: _____

Date of birth: _____ School currently attending: _____

Surname: _____ Given name/s: _____ Current year group: _____

Date of birth: _____ School currently attending: _____

Surname: _____ Given name/s: _____ Current year group: _____

Date of birth: _____ School currently attending: _____

N.B. Bursary applications are renewable each year

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).

Source	Details	Amount
_____	_____	_____
_____	_____	_____

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
- (2) Are you a beneficiary (either capital or income) in a discretionary or unit trust? YES / NO (include any income from these sources on the next page).

BURSARY INFORMATION – FINANCIAL SUMMARY
MOST RECENT FINANCIAL YEAR

Please complete all sections prior to submission

St Margaret's



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Income: Family Gross Income and Support (fortnightly):

Description	Amount each fortnight
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): (a-b)
 (after above deductions)

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

BURSARY DURATION

Expected duration of bursary assistance: _____ to _____
 (i.e. for how long do you expect to need assistance?)

(Please note bursarial assistance can only be provided to assist with general tuition fees. Payment of the building levy, component charges, stationery and uniform costs remain the responsibility of the parent/guardian.)



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BURSARY APPLICATION

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

COMMITMENT

I/We hereby make an application for tuition fee assistance for the coming year. This application has been completed conscientiously believing that all details contained herein to be true and correct.

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

- **To pay the agreed assessed fee via the Methods of Payment listed in the Domestic Fee Schedule over the school year.**
- **To advise the School of any change in financial circumstances that may occur during the term of a bursary.**

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 the bursary. 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 bursary are **confidential transactions** between St Margaret's Anglican Girls School and the applicant.

Signed: _____ Date: ___ / ___ / ___
 (Parent/guardian (1))

Signed: _____ Date: ___ / ___ / ___
 (Parent/guardian (2))

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. Bursary 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: ___ / ___ / ___