



Financial Assistance Application Form

Information for Applicant

For students facing severe financial hardship, this form allows you to apply for a waiver of tuition and resource fees (course fees only). The below financial assistance form and guidelines will help you assess your current financial situation and determine your eligibility. Please note that fee waivers are granted only in exceptional circumstances of severe hardship.

South Regional TAFE follows the Department of Training and Workforce Development Fees and Charges Policy when assessing applications. Only students enrolled in Certificate I to IV courses are eligible to apply.

Any income and expenses you list on this form must be supported by relevant documentation. Evidence of this is mandatory as perbelow:

- Copy of bank statement/s (minimum 8 weeks of transactions) and must include partner bank statements for married or de-facto relationships or your guardian/parent's bank statements if you are their dependant and they are paying your fees;
- Centrelink income statement for the most recent 8 weeks payments that details the type of benefit and amount you receive;
- Your Income Tax Assessment Notice for the last two financial years (only if payslips cannot be provided);
- Pay Slips, Payment Summaries (minimum most recent 8 weeks);
- Expenses for the last 8 weeks (power, gas, mortgage/ rental bills);
- Any other supporting documentation that may assist your application for financial assistance.

PART 1

Student ID:

1: STUDENT & COURSE DETAILS

Family name (surname):		First given name:	
Address:		Email:	
Suburb:	Postcode:	Mobile number:	
National Course Code:		Course Title:	
Semester:	Year:	Campus:	
Total fees payable: \$		How much can you afford to pay? \$	
I am applying for:	<input type="checkbox"/> Fees Waiver – <i>only available for students studying Cert I – IV Courses and whose income does not exceed low-income health care card thresholds</i>		

2: PERSONAL CIRCUMSTANCES

I am seeking financial assistance for my enrolment due to the following reasons (*if applicable – additional info can be added in an attachment*)

What is the present arrangement in your household: <input type="checkbox"/> Living alone <input type="checkbox"/> Living with parents / guardian <input type="checkbox"/> Living with spouse/partner <input type="checkbox"/> Other (please specify):	Tick which is most applicable to your circumstances: <input type="checkbox"/> I am self-supporting (no one assists me financially) <input type="checkbox"/> I am financially supported by another person
Describe your present employment status: <input type="checkbox"/> Full-time <input type="checkbox"/> Casual <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time <input type="checkbox"/> Not working <input type="checkbox"/> Receiving pension. <input type="checkbox"/> Seeking employment	Are you currently receiving Centrelink payments: <input type="checkbox"/> YES <input type="checkbox"/> NO Does your income exceed the low-income health care card thresholds: <input type="checkbox"/> YES <input type="checkbox"/> NO

3: DEPENDANT DETAILS (if applicable – additional info can be added in an attachment)

Full name	Relationship to you	Age	Income
			\$
			\$
			\$

PART 2

4: DETAILS OF INCOME & EXPENSES

Applicant’s income: including government pensions, benefits and allowances; calculated fortnightly.

Applicant’s expenses: including living expenses of my dependents that are normally paid by me, calculated fortnightly:

INCOME (fortnightly amount, after tax)	AMOUNT
Fortnightly salary	\$
Government pension, benefit or allowance	\$
Worker’s compensation	\$
Superannuation / Pension	\$
Interest on deposits/debentures	\$
Child support, spousal/child maintenance	\$
Other, specify:	\$
TOTAL INCOME	\$

EXPENSES	AMOUNT
Rent/ board/ mortgage	\$
Credit card repayments	\$
Other loan repayments	\$
Food	\$
Clothes	
Telephone and Internet	\$
Gas / electricity / Water	\$
Other, specify:	\$
TOTAL EXPENSES	\$

5: ASSETS & LIABILITIES

ASSETS	AMOUNT
Cash (not in a bank account)	\$
Money owed to you	\$
Current bank balances/investments:	\$
Account 1: \$ _____	
Account 2: \$ _____	
Account 3: \$ _____	
TOTAL	\$
TOTAL ASSETS	\$

DEBTS	AMOUNT
Amount owing on mortgage	\$
Amount owing on motor vehicle	\$
Amount owing on other loans(provide evidence)	\$
Credit cards: If more than one listseparately	\$
• Amount owing\$ _____	
• Limit on card \$ _____	
• Amount owing \$ _____	
• Limit on card \$ _____	
Other debts or financial commitments(Please specify):	\$
TOTAL DEBTS	\$

PART 3**6: DOCUMENT CHECKLIST:**

Copy of bank statement/s (minimum 8 weeks of transactions) and must include partner bank statements for married or de-facto relationships. - If you are currently living in the family home, then your parent/guardian income details must be provided.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Centrelink income statement for the most recent 8 weeks payments that details the type of benefit and amount you receive.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Pay Slips, Payment Summaries (minimum most recent 8 weeks)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Expenses for the last 8 weeks - power, gas, - mortgage/ rental bills - personal loans	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Any other supporting documentation that may assist your application for financial assistance	<input type="checkbox"/> YES	<input type="checkbox"/> NO

PART 4**7: ACKNOWLEDGEMENT & CERTIFICATION**

<p>I certify that:</p> <ul style="list-style-type: none"> The facts that I have provided on this application are true and accurate to the best of my knowledge, information and belief. I am aware that it is an offence to provide information that is false or misleading. I have submitted all required evidence as copies to support this application. 		
Name:	Signature:	Date:
Parent/Guardian Name (U18):	Signature:	Date:

PART 5

7: CHECKLIST TO BE COMPLETED BY STUDENT SERVICES:

Outstanding fees are for publicly funded enrolments and not for fee for service or international enrolments.	<input type="checkbox"/> YES <input type="checkbox"/> NO	Applicant has completed the statement of income and expenditure and signed the declaration.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Applicant has demonstrated a commitment to successfully complete the course of study.	<input type="checkbox"/> YES <input type="checkbox"/> NO	Applicant has provided copies of bank statements, pay advice, Centrelink statements, rent/mortgage statement, bills, payslips, child support evidence etc.	<input type="checkbox"/> YES <input type="checkbox"/> NO
The applicant was offered a payment plan in the first instance.	<input type="checkbox"/> YES <input type="checkbox"/> NO	Is the applicant's income within the low- income health care card thresholds for the 8-week period prior to applying.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Applicant has justified why they cannot meet the instalments set out in the payment plan for this enrolment.	<input type="checkbox"/> YES <input type="checkbox"/> NO	Statement of income and expenditure supports applicant/s claim of financial hardship.	<input type="checkbox"/> YES <input type="checkbox"/> NO

Date received:		Financial assistance value:	\$
Supporting documents attached (including statement of account)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Form checked by (name):	

8: APPROVALS TO BE COMPLETED BY THE COORDINATOR STUDENT SERVICES:

RECOMMENDATION <input type="checkbox"/> Full waiver	Tuition Fee: \$	Resources Fee: \$	Full Amount: \$
APPROVED: YES <input type="checkbox"/> NO <input type="checkbox"/> (If NO, provide Reason for Non-approval and complete section 9.3)		Reason for Non-approval:	
Name of Approving Officer:		Date:	Signature:

MANAGING DIRECTOR APPROVAL		APPROVAL
Director, Organisational Services	Signature: _____ Date: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
Managing Director	Signature: _____ Date: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO

9: NEXT STEPS:

1: MD's Executive Support:	2: Manager Student Services:	3: Approved: Student Services	4: Not approved: Student Services:
Scan and email MD's decision to <u>Manager Student Services</u>	Forwards approval to appropriate student services team for processing.	Send to Finance & Admin for processing. Advise student of outcome in writing Add notes in Student Comments Records manage all documentation	Advise student of outcome in writing Add notes in Student Comments Records manage all documentation