Rostrevor College

67-91 Glen Stuart Road, Woodforde SA 5072
(08) 8364 8200
finance@rostrevor.sa.edu.au
www.rostrevor.sa.edu.au

Application for Financial Assistance

In order for your application to be considered, please ensure all sections of this application are completed and all supporting documentation is attached. Completed applications and supporting documentation must be submitted by email to finance@rostrevor.sa.edu.au.

All applications are treated in the strictest confidence in accordance with the requirements of the Privacy Act. We may contact you by phone or email to request further information where required.

Parent / Caregiver Details 1

First Name: _____ Last Name: _____

Address: _____

Email Address: _____ Phone: _____

Parent / Caregiver Details 2

First Name: _____ Last Name: _____

Address: _____

Email Address: _____ Phone: _____

Separated: *(please tick as applicable)* ☐ Yes ☐ No

If Yes, each parent/caregiver may submit separate application forms, but they will be considered on a joint basis.

Employment Information - Parent / Caregiver Details 1

Employer Name: _____ Position: _____

Start Date: _____ Annual Salary: _____

Status: ☐ Full-Time ☐ Part-Time ☐ Permanent ☐ Casual

Payment Cycle: ☐ Weekly ☐ Fortnightly ☐ Monthly Other: _____

Employment Information - Parent / Caregiver Details 2

Employer Name: _____ Position: _____

Start Date: _____ Annual Salary: _____

Status: ☐ Full-Time ☐ Part-Time ☐ Permanent ☐ Casual

Payment Cycle: ☐ Weekly ☐ Fortnightly ☐ Monthly Other: _____

Names of all dependent children in your family:

Name	Date of Birth	Current Year Level	School Attending

Please show all income before tax:

Monthly Income	Parent/Caregiver 1	Parent/Caregiver 2	Total
Employment			$
Centrelink			$
Child Support			$
Other Income			$
Total Monthly Income			$

Monthly Expenses	Total
Mortgage/Rent Repayments	$
Other Loan Repayments	$
Household Expenses (Food, Clothing, Gas, Electricity, etc)	$
Insurance (Medical, Life etc)	$
Motor Vehicle Expenses (Registration, Petrol, Insurance, etc)	$
Credit Card Payments	$
Other Expenses (give details)	$
Legal	$
Total Monthly Expenses	$

Assets	Total
Home (Primary Residence)	$
Other Properties	$
Motor Vehicle(s)	$
Boat/Caravan	$
Savings/Term deposits	$
Shares/Investments	$
Superannuation	$
Other	$
Total Assets	$

Liabilities	Total
Home Loan	$
Car Loan(s)	$
Investment Loan(s)	$
Credit Cards	$
Tax/Government Debt	$
Other	$
Total Liabilities	$

Have you or members of your immediate family travelled overseas in the last 12 months?
If yes, please provide details. ☐ Yes ☐ No

Please give details of any additional information which may support your application (i.e. change in circumstances, redundancy, health issues, etc):

Copies of the following documents MUST be provided to support this application. If any document is not applicable, please tick ' N/A':

	Parent/Caregiver 1	Parent/Caregiver 2
ATO Taxation Return and Notice of Assessment for previous financial year	☐ Yes ☐ N/A	☐ Yes ☐ N/A
Employer PAYG Income Statement(s) for previous financial year	☐ Yes ☐ N/A	☐ Yes ☐ N/A
Centrelink Payment Summary for previous financial year	☐ Yes ☐ N/A	☐ Yes ☐ N/A
Centrelink Income Statement showing current entitlements	☐ Yes ☐ N/A	☐ Yes ☐ N/A
Most recent payslip from employer	☐ Yes ☐ N/A	☐ Yes ☐ N/A
Most recent rental statement or mortgage home loan bank statement(s)	☐ Yes ☐ N/A	☐ Yes ☐ N/A
Most recent Council Rates notice	☐ Yes ☐ N/A	☐ Yes ☐ N/A

I hereby certify the information I/we have supplied is complete and correct.

Parent/Caregiver 1 Signature: Date: / /

Parent/Caregiver 1 Name:

Parent/Caregiver 2 Signature: Date: / /

Parent/Caregiver 2 Name:

Office Use Only

School Account Year: _____

Debtor/Family ID: _____

Tuition Fee Support (%): _____

Approved by: _____ Date: / /

Signature: _____ Date: / /

Director of Business

Signature: _____ Date: / /

Principal