Sisters of Charity Foundation TAFE National Scholarship Application

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| --- |
| Name: |
| Address: |
| Date of Birth: |
| E-mail: |
| Phone Contact: |
| Course you have enrolled in: |
| Course start date: |
| Expected course completion date: |

# Commitment to studies/goals:

* Please outline the factors that disadvantage you or act as obstacles for you pursuing your studies. How have you overcome these obstacles in order to pursue your studies?
* Please describe how your foster/kinship (out of home care) experience has affected your studies and life.
* Please describe your contributions in the community and highlight any achievements or involvement life (i.e., include past studies/courses successfully completed, past employment, community work, team sports, volunteer work, etc.).
* Please describe your study, career and personal goals and tell us how being a recipient of this scholarship will assist you to achieve these goals
* How will you use your scholarship funds? Please give details:

# Citizenship/Residency

Are you a permanent resident of Australia? Yes ☐ No ☐

# Evidence of Foster/Kinship Experience (Out of Home Care)

What was the period of your foster/kinship (out of home care) experience

From: Click or tap to enter a date. To: Click or tap to enter a date.

Please provide a supporting statement from an appropriate referee (e.g., case manager, school counsellor, foster carer, etc.) to validate your foster/kinship (out of home care) experience. See referee section.

# Financial Situation

What are your annual study costs (estimated):

|  |  |  |
| --- | --- | --- |
| ANNUAL STUDY COSTS AND ASSOCIATED FEES | $ | Amount |
| Enrolment Fees (can be an estimate if unknown) | $ |  |
| Textbooks | $ |  |
| Equipment / Materials | $ |  |
| Other | $ |  |
| Total | $ |  |

Are you a diploma student receiving VET Student Loan? Yes  No

What is your current or anticipated fortnightly income and expenditure

|  |  |  |
| --- | --- | --- |
| INCOME (per fortnight) | $ | Amount |
| Austudy / Abstudy | $ |  |
| Employment | $ |  |
| From parents / family / spouse | $ |  |
| Youth Allowance | $ |  |
| Family Assistance payment | $ |  |
| Sole Parent Pension | $ |  |
| Disability Support Pension | $ |  |
| Carer payment | $ |  |
| Other (please specify) | $ |  |
| Total Fortnightly Income | $ |  |

Are you currently in receipt of any other scholarship, bursary, or grant? Yes ☐ No ☐

If yes, please give detail:

# Evidence to support application

You may like to provide the following documents in support of your application:

* letter of reference from employer/school
* academic transcripts
* certificates of participation/achievement
* resume

Please also provide evidence of your income i.e., your latest Centrelink Income Statement, your last two payslips or a copy of your Australian Taxation Office (ATO) assessment notice for the previous financial year.

Please include the names of two (2) verbal referees. One must include a case worker, foster/kinship carer, or someone who can validate your foster/kinship care circumstances in a written supporting statement (i.e., school principal, school counsellor, religious leader, employer, etc.).

Referees must be known to you for a minimum of three (3) months and be able to comment on your ability to meet the selection criteria for this scholarship.

* + Full Name:

Relationship to applicant:

Mobile No: Telephone:

Email:

* + Full Name:

Relationship to applicant:

Mobile No: Telephone:

Email:

# Declaration

I declare that all information and documents supplied to support my application are complete, true, and correct.

I am aware that there are severe penalties for providing false or misleading information and that I may be required to repay monies received to which I am not entitled.

I agree to provide further evidence to substantiate the information provided within my application, if requested. I understand that I may be required to attend an interview with a selection panel.

I understand that the value of this award may be assessable for Centrelink and/or income tax purposes and may affect my Centrelink payment rate. I accept that I am responsible for seeking my own advice and contacting Centrelink and/or the Australian Taxation Office as appropriate for further information.

I accept that the selection panel’s decision is final.

I accept that I cannot appeal the decision and no correspondence concerning the decision will be entered into.

Applicant name:

Applicant signature:

Date:

Completed application or enquiries can be sent to Student Experience TasTAFE  
  
Email: [**student.experience@tastafe.tas.edu.au**](mailto:student.experience@tastafe.tas.edu.au)