



2023 SCHOLARSHIP APPLICATION

Scholarships at The Women’s College are awarded on merit¹ and financial need².

Before submitting your Scholarship Application to the College, please ensure you have included the following supporting documentation (where applicable). Documentation for the applicant’s parents is also required if the applicant resides with them at home.

Applications for a Scholarship will not be considered unless all applicable supporting documentation has been provided:

DOCUMENTATION ATTACHED? (YES or N/A)	SUPPORTING FINANCIAL DOCUMENTATION
	Copy of the last two Notices of Income Tax Assessments for the applicant and her parents
	Copy of the most recent advice from Centrelink confirming entitlements to Family Assistance or other welfare payments
	Copy of most recent rates notice in respect of principal place of residence and any other properties that the applicant, their parents and any associated entities may have an interest therein (include both pages of the rate notice)

Applicant’s full name

Email this form and all supporting documentation in **one PDF document** (not as separate pages) to the Registrar: registrar@thewomenscollege.com.au

Applications close at **5pm on Tuesday 4 October 2022.**

¹ A candidate’s “merit” is assessed on but not limited to the following criteria: academic results, leadership experience and/or potential, community engagement, co-curricular involvement, College interview.

² Financial need is confidentially assessed by the College Business Manager, based on this document and supporting material.

SECTION A:

This section relates to the person or persons responsible for the payment of the applicant's College fees and other related expenses e.g. the applicant, the applicant's parents, the applicant's guardian etc.

Name 1:

Prof/Dr/Mr/Mrs/ Ms/Miss (First Name) (Family Name)

Residential Address
..... Postcode Telephone No

Postal Address (if different from residential address)
..... Postcode

Date of Birth / / Marital Status No. of Dependents

Employer's Name and Address
..... Postcode Telephone No.

Occupation Nature of work performed

Date commenced with this employer /

Name 2:

Prof/Dr/Mr/Mrs/ Ms/Miss (First Name) (Family Name)

Residential Address
..... Postcode Telephone No

Postal Address (if different from residential address)
..... Postcode

Date of Birth / / Marital Status No. of Dependents

Employer's Name and Address
..... Postcode Telephone No.

Occupation Nature of work performed

Date commenced with this employer / /

SECTION B: FINANCE

Include an estimate of current year figures

INCOME - ANNUAL	APPLICANT	PARENTS
Total Gross Income including Current salary package (including fringe benefits and superannuation, Business, Investment, Trust).	\$	\$
Gross rental income	\$	\$
Do you or any members of your family receive social security or other welfare payments? YES/NO Indicate the source of these payments and	\$	\$
Do you receive Austudy or any other Government educational or other assistance? YES/NO Provide details:	\$	\$
TOTAL INCOME	\$	\$
EXPENSES - ANNUAL	APPLICANT	PARENTS
Income tax payable	\$	\$
Mortgage/rent	\$	\$
Other loans/hire purchase costs - Purpose:	\$	\$
Domestic Expenses - Food, clothing, Living expenses	\$	\$
Education expenses - Total fees and charges paid to attend secondary schools this year (siblings of applicant)	\$	\$
- Fees and charges being paid this year for dependent children at tertiary	\$	\$
TOTAL EXPENSES	\$	\$

Estimate current asset values

ASSETS - CURRENT VALUES	APPLICANT	PARENTS
Principal place of residence	\$	\$
Additional properties in which you have an interest	\$	\$
Motor vehicles	\$	\$
Furniture/Appliance/Personal Effects	\$	\$
Amounts held at - Banks and other financial institutions including Investments, Bonds, Debentures, Shares	\$	\$
Other (specify)	\$	\$
TOTAL ASSETS	\$	\$

AMOUNTS OWING BY YOU	APPLICANT	PARENTS
Mortgage on principal place of residence - Mortgage	\$	\$
Mortgages on additional properties	\$	\$
Personal Loans	\$	\$
Bank loans - business/trade purposes	\$	\$
Investment loans (specify)		
Credit cards		
TOTAL LIABILITIES	\$	\$

SECTION C: REFEREES

If there are any third parties who would be prepared to verify your financial and/or personal circumstances, provide details.

Name

Address

Position Telephone No.

Name

Address

Position Telephone No.

SECTION D: APPLICATION

State the reasons for seeking scholarship assistance:

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Other relevant information:

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SECTION E: DECLARATION

The information above is given in confidence to assist the College and their financial advisors in evaluating my (our) application.

I (We) agree to provide any further information required by the College and their financial advisors. I (We) give authority to the College and its financial advisors to contact my (our) representatives and I (we) further agree to meet all costs that arise from this application with respect to the provision of such information.

I (We) declare that all of the information given above is true to the best of my (our) knowledge or belief.

Privacy Consent

By completing this form, you grant us the consent to use your personal data in accordance with our [privacy statement](#). The College will use and disclose this information for the purposes of processing this form. It will not be used for any other purpose, except where the College is required or authorised by or under an Australian law or a court/tribunal order.

Your consent is valid for this form and is voluntary. If you do not provide all the information requested, we may be unable to process the information contained in this form.

Privacy Collection Notice

The information provided in this form will only be used for the administrative or educational purposes of the College, or in accordance with your specific consent. How the College collects, uses or discloses your personal information and the College's handling of your personal information is contained in the College's [Privacy Policy](#). You have a right to access your personal information that the College holds about you and to seek its correction. If you wish to access your personal information or inquire about the handling of your personal information, please email the [Business Manager](#).

.....
Name of Applicant

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Signature of Applicant

Signature/s of Applicant's Parent/s

Date

Date