



Trinity
Catholic College
Lismore

General Bursary Application
Financial Information Form

PRIVATE AND CONFIDENTIAL

1. Student's Name:

2. Particulars of Other Dependent Children in the Family

Name	Age	School/University/Other

** Please indicate here if any of your other children are receiving a subsidy and to what extent, from any other school.*

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3. Name of Father or Guardian:

Address:

..... Postcode:

Telephone: (Home)..... (Business)

(Mobile).....Email address:

4. **Name of Mother or Guardian:**
Address:
..... Postcode:
Telephone: (Home)..... (Business)
(Mobile).....Email address:.....

5a. Employment Details: Father/Guardian

If self-employed:

Name and Address of Own Business:.....
..... Postcode:.....
Type of Business:
Year Business Established: No of Employees:
Annual Gross Income: \$
Net Income Before Tax: \$ Net Income after Tax: \$

OR

Name and Address of Employer:.....
..... Postcode:.....
Position Held:
Annual Gross Salary: \$ Annual Net Salary: \$

5b. Employment Details: Mother/Guardian

If self-employed:

Name and Address of Own Business:.....
..... Postcode:.....
Type of Business:
Year Business Established: No of Employees:
Annual Gross Income: \$
Net Income Before Tax: \$ Net Income after Tax: \$

OR

Name and Address of Employer:.....
..... Postcode:.....
Position Held:
Annual Gross Salary: \$ Annual Net Salary: \$

Pay slips are to be submitted together with most recent Tax Returns and Assessments

6. Why are you applying for Fee Assistance or a Bursary?

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7. Other Sources of Income and/or Cash

(Verification required)

DETAILS:

ASSET	LOCATION	VALUE OR BALANCE	HELD Jointly/husband/wife <i>(Please indicate)</i>
Investment Properties			
Bank Accounts			
Building Society			
Credit Union			
Cash Management Trust			
Shares			
Debentures			
Managed Funds			
Other (eg, Centre Link Payments)			

*** Please provide details of items – copy of Bank Accounts, Bank Statements, etc**

8. Details of Accommodation (Principal Residence)

House Flat Owned Rented ***(Please tick appropriate box)***

If rented, please indicate weekly rent: \$ Length of Lease:

If owned, please complete the following:

Year Purchased: Purchase Price: \$

Amount Borrowed: \$..... Period of Loan:

Current Balance Owing: \$..... Current Monthly Payments: \$.....

Current Market Value: \$ *** Please provide evidence of loan or rental payments**

9. Details of Car(s) Owned

Number of cars owned: *(Please tick appropriate box)*

- 1 2 Company Car

Please give details of car(s):

	1 st Car	2 nd Car	Company Car
Make and Model			
Purchase Price			
Car fully paid for (Yes/No)			
Monthly Payments			
Period of Loan			
Current Balance Owing			
Net Value			

** Please provide evidence of loan repayments*

10. Overseas Travel

Have either parents or any members of the family travelled overseas during the last twelve months? Yes No

If YES, please give full details:

Source of funds:

11. Additional Information

Please supply any additional information which may assist your application.

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12. Application Checklist

Before lodging this application, please complete the Application Checklist:

- Cover letter attached (optional)
- This Financial Information Form has been completed
- Pay slip for Parent 1/Carer 1 attached (page 4)
- Tax assessment/return for Parent 1/Carer 1 attached (page 4)
- Pay slip for Parent 2/Carer 2 attached (page 5)
- Tax assessment/return for Parent 2/Carer 2 attached (page 5)
- Evidence of other sources of income (bank statements, etc) attached (page 6)
- Evidence of mortgage/rental payments attached (page 6)
- Evidence of car loan repayments attached (page 7)
- Evidence of any other liabilities attached (page 7)
- Declaration is completed by person/s who signed student's enrolment agreement (page 8)
- Copy of completed application and attachments retained for applicant's records

13. Declaration

I declare that the particulars shown in this application form and in any accompanying documents are true and correct in every detail and disclose a full and complete statement of my total income derived from all sources.

I also agree that should any relevant information prove to be false, or omitted from this application, it will render the application null and void.

Signature(s) of Applicant(s):

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Father/Guardian

Mother/Guardian

Date of Application:

OFFICE USE ONLY

Director of Finance

Principal