PURPOSE: The purpose of the Student Equity Emergency Grant (SEEG) is to assist CSU students financially who have experienced an unforeseen adverse event or emergency. The SEEG is designed for those who are affected by individual disasters outside their personal control and excluding widespread ongoing disasters that affect large numbers of people and are covered by Centrelink benefits (see Centrelink listings of Active and Closed Emergency Events).


Types of personal misfortune that are envisioned would involve expenditure such as – for example - unforeseen medical, legal or travel expenses by self or a dependant, or replacement of goods due to loss occasioned by theft, accident or natural disaster. The expense could be in the context of a continuing situation such as ill-health or drought, but would be a sudden additional need precipitated by a sudden event.

GUIDELINES: For full details of the conditions attached to the Student Equity Emergency Grants, please read the Guidelines on the Student Equity website. Please note that you are REQUIRED to have read these Guidelines:


ELIGIBILITY: Applicant must be an Australian citizen or permanent resident, or holder of one of the following visas: Australian permanent resident humanitarian visa, temporary protection visa, temporary humanitarian visa, or return pending visa. International students are not eligible. Applicants will be experiencing financial hardship. Applicants must be able to demonstrate that they have suffered some sort of recent, emergency adverse event. Applications for grants will only be considered up to 3 weeks following the event. The payment may be retrospective to the expense occurred e.g. travel, replacement of computer, hire of car.

BENEFITS: The grants are valued up to a maximum of $500 and are intended to assist students with basic needs that will assist the student to maintain their academic study. Payment will be made directly to the student, by means of an electronic funds transfer (EFT) payment.

DOCUMENTATION: Students MUST provide documentation where requested to do so. The requirement of documentation is signified by the paperclip symbol. Applications with incorrect or no supporting documentation required for determining eligibility will be deemed ineligible, or will not have the particular section/s to which the documentation relates, assessed.

HOW TO APPLY: Step 1 Print and complete this SEEG Application Form.

Step 2 Ensure that all required documentation is attached to your application form.

Step 3 Scan and Email, mail or drop off the completed application form to:

Confidential – SEEG Application
Student Equity & Diversity Officer
Charles Sturt University
Panorama Avenue
BATHURST NSW 2795

equity.officer@csu.edu.au
phone/fax: 02 6338 4256
STUDENT EQUITY EMERGENCY GRANTS
APPLICATION FORM

CSU student number

<table>
<thead>
<tr>
<th>SECTION A</th>
<th>PERSONAL DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Given names</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Family name</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Term residential address</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Town / suburb</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>State</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Postcode</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Daytime contact phone number</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>E-mail address</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
<tr>
<td>Preferred contact method in next week</td>
<td>☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SECTION B</th>
<th>ENROLMENT DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Are you a Commonwealth supported student (HECS)? ☐ YES ☐ NO</td>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>2 Name of course/degree</td>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>3 Campus</td>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>4 Are you studying: PLEASE CIRCLE Full Time Part time Distance Internal Mixed mode</td>
<td>☐ YES ☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SECTION C</th>
<th>FINANCIAL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Are you in receipt of, or will you be in receipt of any scholarship/s in 2012? ☐ YES ☐ NO</td>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>If ‘YES’, what is the name of the scholarship/s?</td>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>What is the total value of the scholarship?</td>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>☐ YES Name of payment</td>
<td>☐ YES Name of payment</td>
</tr>
<tr>
<td>☐ NO – (go to 3)</td>
<td>☐ NO – (go to 3)</td>
</tr>
<tr>
<td>☐ YES If ‘YES’, please attach a current Centrelink Income Statement relating to this benefit</td>
<td>☐ YES If ‘YES’, please attach a current Centrelink Income Statement relating to this benefit</td>
</tr>
<tr>
<td>☐ NO – (go to 3)</td>
<td>☐ NO – (go to 3)</td>
</tr>
</tbody>
</table>
There are a very small number of applicants who experience exceptional financial hardship, but who are not in receipt of a means-tested Commonwealth income support payment. This generally does not include applicants whose family income is above the threshold for eligibility for a means-tested Commonwealth income support payment in 2012. If you are not in receipt of a Commonwealth income support payment (CentreLink) and wish to claim exceptional financial hardship, you must provide us with the following information:

a) Describe why you are not eligible for a means-tested Commonwealth income support payment for 2012
______________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________

b) Describe the exceptional financial hardship you are experiencing and will continue to experience in 2012
______________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________

C) What was the period of the exceptional financial hardship up until now? Years______ Months______

d) Do you expect your exceptional financial hardship to continue in 2012 and beyond? If so, for how long? Explain why.
______________________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________________

**Documentation required for exceptional financial hardship**

You must attach to your application the following documents if applicable to you:

- an ATO Notice of Financial Assessment for the last financial year and copies of pay slips for the last two months
- a copy of your Health Care Card
- a copy of a statement with details of any Centrelink payment you are receiving that is not both income- and assets-tested.
- If you are living with your parent/s (or with a partner) and you are being financially supported you must also attach to your application evidence of your parent/s’ (partner’s) income (eg an ATO Notice of Financial Assessment for the last financial year).
- If you are being financially supported by your parent/s (whether you are living with them or not) or by your partner they must also prepare a statement that they are supporting you. In the statement they must also provide details of any other dependent children, including their ages and whether or not they are tertiary students at home or away.
- Attach to your application any other documents you wish in order to demonstrate your exceptional financial hardship.

4 Do you hold a current Centrelink Health Care Card? □ YES  □ NO

- If ‘YES’, please attach a copy.

**Employment Information**

5 What is your current employment situation?

- □ Not currently employed
- □ Permanent part time
- □ Casual periodic
- □ Full time
- □ Casual regular
SECTION D EMERGENCY DETAILS

6 Please describe the nature of the emergency e.g. fire, accident, illness, theft etc.

7 Please describe how the event occurred and how it will impact on your studies. If the event involved monetary loss or expenditure (e.g. property loss, travel, replacement of goods etc) please estimate amount of loss/expenditure:

8 SUPPORTING DOCUMENTATION

Please attach EITHER official documentation of the event e.g. police report, fire station report, medical certificate etc if available.

OR, if this event cannot be documented by an official/professional report, then you must provide a statement of support from a responsible person who knows you and your circumstances but is not related, e.g. a University staff member, placement supervisor, doctor, lawyer, social worker, religious leader, school teacher, etc. This statement of support should be in the following format:

STATEMENT OF SUPPORT RELATING TO CSU STUDENT ……………………………………………….. (Please add name)

I have read and I support the applicant's personal statement. I know the applicant in my capacity as ………………………………………………………………………………………………………..

I know the adverse event has affected the applicant in the following way:

_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

Name of person providing this statement ______________________________________________________________

Position / occupation __________________________ Name of organisation (If applicable) __________________________

Address __________________________________________ State __________ Postcode __________

Ph (BH) __________________________ Mobile __________________________

Signature __________________________ Date __________________________
SECTION E  PRIVACY AND DOCUMENTATION

Personal information provided for the administration of the Student Equity Emergency Grant is protected by the Privacy and Personal Information Protection Act 1998 (NSW).

The information collected will only be used by authorised staff to assess eligibility and administer the SEEQ. Students should be aware that they provide information of their own free will.

Personal information provided by the student will not be made available to any person within the University or any person or organisation outside the University for any other purpose without the student’s consent, except where the University may be legally required to do so. Applicant files will be held in a secure filing cabinet which is accessible only to authorised employees and will be kept for the appropriate legal time limit and then destroyed.

Students may access their personal and health information to ensure that it is not inaccurate, irrelevant to the purpose for which it was collected, misleading, incomplete or out-of-date. Students may also request that a Student Equity Officer amend any of the information held about them or to add comments or explanations in relation to their information. To do any of these things students should contact one of the Student Equity Officers.

Students dissatisfied with the way a Student Equity Officer has handled their personal or health information may apply to have the matter reviewed by lodging a formal application with the CSU Privacy Officer.

In the submission of a signed Student Equity Emergency Grant students consent to the University accessing the student’s records for the purposes of assessing and administering the Student Equity Emergency Grant.

Please tick the boxes to indicate you have read and understood the statement.

☐ I certify that the information supplied on this application form and in the accompanying documents is complete, true and correct.

☐ I understand that giving false or misleading information is a serious offence under the Criminal Code.

☐ I understand that incorrect information will render my application invalid, and in such a case, the committee may revoke the Grant.

☐ I have read the Student Equity Emergency Grant Guidelines 2012 and understand that in the submission of this signed Application Form I accept the terms and conditions as given in the Student Equity Emergency Grant Guidelines 2012.

☐ I have read the privacy statement above.

Documentation Checklist

Please tick the boxes to indicate you have read the statement and attached the required documentation.

- Current Centrelink Income Statement in my name  ☐ Attached  ☐ Not applicable
- Documentation of the adverse event  ☐
- Signed support statement from responsible person  ☐
- If you answered Q.3 in Section B ‘Financial Information’ Relevant documents to support your case  ☐ Attached  ☐ Not applicable

SECTION F  FINANCIAL DETAILS FOR PAYMENT OF GRANT, IF APPROVED

If this grant is approved, CSU Finance will deposit funds directly into your bank account. Please ensure that your bank account details are up to date by visiting my.csu, personal info, personal detail, maintain your personal details, enter your password, then under ‘edit my details’ choose ‘check bank details’. Your bank account details will be shown here. If you need to update them, click ‘change’ and update. I have checked in my CSU personal details that these financial institution details are correctly entered

Yes ☐

SECTION G  ELIGIBILITY STATEMENT

Please provide a brief statement in this space on how an Emergency Equity Grant would assist you:

_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

SECTION H  SIGNATURE AND DATE

Signed ___________________________ Date ___________________