



**CHARLES STURT FOUNDATION
2010 HARDSHIP / DISABILITY
FORM**

OFFICE
USE
ONLY

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|--|--|--|--|--|--|--|

This form needs to be submitted as an accompanying document if you are applying for a scholarship that includes a criteria for **Hardship: complete Sections A, B and D**
Disability: complete Sections A, C and D

Section A PERSONAL DETAILS

| | |
|---|---|
| Title | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other _____ |
| Given names | |
| Family name | |
| Campus attending | |
| Application ID No. (this will be given to you at the completion of the on-line scholarship application) | |

Section B HARDSHIP – complete this section if you are applying on the basis of hardship

Supporting documentation where requested is always required.

It is necessary for you to provide the documents requested to assess you for a Charles Sturt Foundation Scholarship.

Applications that do not have supporting documentation may not be assessed.

1. What was your total taxable income for the year ending 30 June 2009? \$

2. Have you completed an Income Tax Return for the year ending 30 June 2009? YES NO

- If 'YES' please provide a copy of your ATO **Notice of Assessment** for the year ending 30 June 2009.
- If you lodged with an accountant and have not received your Notice of Assessment please provide a copy of the accountant's submission to the tax office on your behalf.

If 'NO', explain why? _____

Please attach a separate sheet if you need more space.

3. Are you currently receiving a Commonwealth income support payment (Centrelink)? YES NO

- If 'YES' please attach a current Centrelink Income Statement

4. If you are receiving Youth Allowance please indicate which category? living at home living away from home independent

5. What is your current balance of cash, savings and cheque book accounts?

| | | |
|-------------------------|-------------------------|-------------------------|
| Cash | Savings | Cheque |
| \$ <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> |

- Please attach a **current** Bank Statement of your cash, savings and cheque book accounts. If you use internet banking, a print out of your account transaction history page and account balance page will suffice.

6. What is your current employment situation? Unemployed Casual Permanent part-time Full-time

- If you are employed as a casual, please attach your three most recent payslips, for each job you work.
- If you are employed full-time or permanent part-time please attach your most recent payslip.

Section B HARDSHIP (continued)

7 Do you anticipate that your current employment situation will change **substantially** when you commence study in 2010? YES NO

8 If 'YES', explain why? _____

Please attach a separate sheet if you need more space.

9 Do you expect to defer payment of your HECS or pay up-front? DEFER UPFRONT

10 What is your **predicted** pre tax income from employment in 2010, **either** per fortnight or per year? p / f year

11 Are you, or will you be receiving any financial support from your parents whilst studying at CSU? This may be in cash, or in kind such as paying rent or bills on your behalf. YES NO

12 If 'YES', what is the value **either** per fortnight or per year? For example \$140 p/f for rent or \$1,000 p/year for textbooks etc. p / f year

13 Do you have children who receive at least half their financial support from you? YES NO

14 Weekly Budget:

| Costs | | Income | |
|---------------|----|----------------------|----|
| Food | | Centrelink Allowance | |
| Transport | | Wages | |
| Text Books | | Other | |
| Health Needs | | | |
| Accommodation | | | |
| Other | | | |
| Other | | | |
| TOTAL | \$ | TOTAL | \$ |

15 Are there any other mitigating circumstances which contribute to your financial status? YES NO
If you answered YES to this question, please give details on a separate sheet.

Section C DISABILITY – complete this section if you have a disability

If you have a severe, long term or recurrent medical condition or disability please complete this section
This may include a learning, sensory, physical, or other disability / disorder and mental health special needs.

1 Describe the nature and length of your medical condition / disability

Please attach a separate sheet if you need more space.

2 Do you expect your medical condition / disability to continue in 2010 and beyond? YES NO - go to 5)

3 If 'YES', for how long? _____

4 Please show the breakdown of your average expenditure as a result of your medical condition / disability **either** per fortnight or per year.

| Expenditure | Amount per fortnight | Amount per year | Expenditure | Amount per fortnight | Amount per year |
|--|----------------------|-----------------|------------------------|----------------------|-----------------|
| Personal Care / Attendant Care / Assistance | | | Respite | | |
| Wheelchairs, scooter (including maintenance) | | | Transport costs | | |
| Pharmaceuticals and health care products | | | Medical practitioners | | |
| Continence aids, and associated products | | | Aids and Equipment | | |
| Therapies and Exercise | | | Other (please specify) | | |
| Total | | | Total | | |

SECTION D DECLARATION**Privacy**

Personal and health information provided for the administration of the Charles Sturt Foundation Scholarships program is protected by the Privacy and Personal Information Protection Act 1998 (NSW) and the Health Records and Information Privacy Act 2002 (NSW).

The information collected will only be used by authorised staff to assess eligibility, rank applicants and administer the Charles Sturt Foundation Scholarships. Students should be aware that they provide information of their own free will.

Personal and health 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.

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 scholarship.
- I understand that in the submission of this signed Charles Sturt Foundation Hardship/Disability Form, I consent to the University accessing my records for the purposes of assessing and administering the Charles Sturt Foundation Scholarships including contact with Centrelink to verify my Commonwealth income support payment details.
- I have read the privacy statement above.

Documentation Checklist

Please tick the boxes to indicate you have attached the documentation if relevant to your circumstances.

- Your ATO Notice of Assessment
- Your Centrelink Income Statement
- Your Bank Statements
- Your payslips

Signed _____ Date _____

Checklist

- Have you read this supporting form thoroughly and completed all relevant sections?
- Have you attached copies of supporting documentation to your form?
- Have you signed the declaration at the end of the form?

YOUR FORM CAN EITHER BE POSTED OR DELIVERED TO THE ADDRESSES AS LISTED BELOW:

| | | | | |
|---|--|---|---|---|
| Albury-Wodonga | Bathurst | Dubbo | Orange | Wagga Wagga |
| By Post to: | By Post to: | By Post to: | By Post to: | By Post to: |
| Charles Sturt Foundation C/- Charles Sturt University PO Box 789 Albury NSW 2640 | Charles Sturt Foundation C/- Charles Sturt University Panorama Avenue Bathurst NSW 2795 | Charles Sturt Foundation C/- Charles Sturt University Locked Bag 49 Dubbo NSW 2830 | Charles Sturt Foundation C/- Charles Sturt University PO Box 883 Orange NSW 2800 | Charles Sturt Foundation C/- Charles Sturt University PO Box 588 Wagga Wagga NSW 2678 |
| Deliver to: | Deliver to: | Deliver to: | Deliver to: | Deliver to: |
| Scholarship Officer Head of Campus Office Thurgoona | Scholarship Officer The Grange Bathurst | Scholarship Officer Yarrandale Road Dubbo | Scholarship Officer Client Services Orange | Scholarship Officer Head of Campus Office James Hagan Court Wagga Wagga |

This form can also be scanned and emailed to:

Albury-Wodonga Scholarshipsalburywodonga@csu.edu.au

Bathurst – scholarshipsbathurst@csu.edu.au

Dubbo – scholarshipsdubbo@csu.edu.au

Orange – scholarshipsorange@csu.edu.au

Wagga Wagga – scholarshipswagga@csu.edu.au