



SURNAME: _____

HUNTER SPORTS HIGH SCHOOL REQUEST FOR STUDENT FINANCIAL ASSISTANCE

STUDENT 1: _____ YEAR: _____ DATE: _____

STUDENT 2: _____ YEAR: _____

REQUESTED FUNDS:

SCHOOL SUBJECT FEES 1. _____ 2. _____

PERSONAL DETAILS:

DO YOU RECEIVE A PENSION? YES/NO TYPE: _____

NUMBER: _____

DO YOU HOLD A HEALTH CARE CARD? YES/NO NUMBER: _____

EMPLOYMENT OF FATHER: _____ EMPLOYER: _____

EMPLOYMENT OF MOTHER: _____ EMPLOYER: _____

ARE YOU A SOLE PARENT: YES/NO

IS YOUR CHILD CURRENTLY RECEIVING A GRANT: YES/NO TYPE: _____

HAVE YOU RECEIVED ASSISTANCE FROM THIS SCHEME ALREADY? YES/NO

GUIDELINES

The Advisory Committee has set the following guidelines:

1. Priority is given to compulsory subject contributions only.
2. Information supplied above will be confidential.
3. Consideration of student attendance record.
4. TSP Fees, Big Picture and Band Fees are not included for financial assistance.
5. School Uniforms will be considered at the Principal's discretion.
- 6. The expectation that school contributions are paid or are being paid by instalments.**

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

H/T WELFARE: _____ PRINCIPAL: _____

Office use only:

Date Processed: _____ Emailed Y W if reqd: _____