

1 Syme Avenue Seacombe Gardens SA 5047 Tel: (08) 8306 4888 contact@smps.catholic.edu.au www.smps.catholic.edu.au

## **Application for Low Income Fees**

Please complete this form and return it to Stella Maris Parish School office including the following **current** documents:

- Your most recent tax return (private and/or business as applicable;
- Your most recent pay slips and other form of income statement;
- Your bank statement for last 3 months;
- A Centrelink Income Statement;
- Any other documentation to support your application.

Please return the completed forms to the Finance Manager.

All applications will be treated with complete confidentiality and will be reviewed by the Principal and Finance Manager before being approved by the School Finance Committee on an anonymous basis.



#### Stella Maris Parish School

1 Syme Avenue Seacombe Gardens SA 5047 Tel: (08) 8306 4888 contact@smps.catholic.edu.au www.smps.catholic.edu.au ABN: 4510 4664 792

#### **CONFIDENTIAL**

# Application for Low Income Fees for the year \_\_\_\_\_

(All questions in this application must be answered. Please print clearly)

FAMILY DETAILS								
Applicant's Surname:								
First Name:								
Address:								
		Post	Code: _					
Home Telephone:		Mobile:						
Email Address:								
Martial Status: Married	Divorced	Separated	Single		Defa	acto		
Children's Name/s		School		Age		Year L	.evel	
ALLOWANCES (please			and the second s			-		
Are you in receipt of School Card Allowance?				Yes	/	No		
Are you in receipt of Austudy Allowance?				Yes	/	No		
Are you aware of other type		Yes	/	No				

SPECIAL BEINEFI	<u>TS</u> (Indicate amount i	received PER WEEK)				
Widow Allowance	\$					
Age Pension	\$			\$ \$		
Disability Pension	\$					
Carer Allowance	\$					
Other (Nominate)			\$			
Transfer Total Benefi	ts per week to Income	Below				
INCOME AND EX	KPENDITURE (Inclu	ude your spouse/partne	er) PER	WEEK		
INCOME		EXPENDIT	JRE			
Gross Wage (Self)	\$	Tax (Self)		\$		
Gross Wage (Partner)	\$	Tax (Partner)	Tax (Partner)			
Family Tax A	\$	_ Rent	Rent			
Family Tax B	\$	Mortgage		\$		
Board or Lodging	\$	Food, Clothing		\$		
Rent Assistance	\$	Medical		\$		
nterest	\$	House Expenses \$		\$		
Special Benefits	\$	_ (Rates, power,	ower, gas, insurance, phone etc			
Other Income:		Car Repaymer	nts	\$		
	\$	_ Car Expenses		\$		
	\$	_ Other School I	ees	\$		
	\$	_ Other Expense	es:			
	\$			\$		
				\$		

- Your most recent Pay Slips (last 3) and/or other forms of income statement as applicable 2.
- Your most recent Bank Statement (at least the last 3 months) 3.
- 4. Your Centrelink Income Statement
- 4. Any other documentation as requested or relevant – must be within last 6 months.

### ASSETS AND LIABILITIES

ASSETS (Value)		LIABILITIES (Tota	l Owing)
House	\$	Mortgage	\$
Car(s)	\$	Credit Accounts	\$
Shares	\$	MasterCard / Visa	\$
Bank Accounts	\$	Retail Store Accounts	; \$
Credit Union A/c	\$	Hire Purchase A/c	\$
Other	\$	Other	\$
TOTAL ASSETS	\$	OTHER LIABILITIES	\$
 Doclaration			
<u>Declaration</u>	na aha hasa safasa la cala la cala	.h_ :_f	alta anno as analana da da
i nereby certify that t	to the best of my knowledge t	ne information supplie	a is correct and complete.
Signature of Applican	nt		Date
Office Use Only	Applicatio	n Accepted / Re	ejected
Principal Authorisation	on		Date