

APPLICATION FOR FEE SUPPORT

Requests for remission should first apply for school card to access a 40% discount, if unsuccessful and still in need of assistance please complete this form and return it to the Business Manager or email finance@smps.catholic.edu

ENROLLING PARENTS/CAREGIVERS

PARENT/GUARDIAN I							
Surname		G	iven Name				
PARENT/GUARDIAN 2							
Surname		G	iven Name				
CHILDREN ENROLLED AT STELLA MARIS PARISH SCHOOL							
CHILD I							
Surname	Given Name			Year Leve	ıl	Enrolling Yr	20
CHILD 2							
Surname	Given Name			Year Leve	ı	Enrolling Yr	20
CHILD 3							
Surname	Given Name			Year Leve	el .	Enrolling Yr	20
I/We being the enrolling Parents/Caregivers as per the enrolment document signed when enrolling, would like to be assessed for Remission.							
If your income was less than school card limits, please apply for School Card. If successful 40% discount will be granted of tuition fees.							
(Please note that we require proof of income from both enrolling parents/caregivers. If this involves a split family situation then the information can be forwarded to this office separately).							
A copy of our most recent Taxation Assessment is attached as confirmation of our earnings. If your circumstances have changed significantly please submit a copy of your most recent 3 pay slips.							
PARENT/GUARDIAN 1							
Surname			Given Name				
Signature			Date				
PARENT/GUARDIAN 2							
Surname			Given Name				
Signature			Date				
OFFICE USE ONLY							
FAMILY ID			TOTAL TUITION F	FEE			
			DISCOUNT APPL	IED			
APPROVED			DATE				