



Department of Education

2017 SECONDARY ASSISTANCE SCHEME YEARS 7 - 12

\$115 Clothing Allowance Paid to parent (or) school
\$235 Education Program Allowance Paid to school

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APPLICATIONS CLOSE
FRIDAY 7 APRIL 2017

- Valid to claim with Parent/Guardian card only.
Student cannot claim with own card if living with parent(s).
Not eligible if student born in 1998 or before.
If living as an independent student, letter of proof from Centrelink must be provided.
Please complete form neatly and in block letters and retain a copy at the school.

SCHOOL NAME (Please use school stamp including phone number if possible) SCHOOL CODE

PARENT/GUARDIAN DETAILS
SURNAME FIRST NAME
STREET SUBURB POSTCODE
CONTACT PHONE No. E-MAIL

PARENT/GUARDIAN DEPARTMENT OF HUMAN SERVICES (CENTRELINK) CONCESSION CARD DETAILS
Centrelink Health Care Card (Family Card only NOT Student card)
Centrelink Pensioner Concession Card
Veterans' Affairs Pensioner Card (Blue card only - expires Dec 2017)
CARD No. (CRN OF PARENT/GUARDIAN):
START DATE ON CARD:
CARD EXPIRY Date: (must fall on or after first day of Term One)

STUDENT DETAILS
INDEPENDENT STUDENT (Attach letter from Centrelink)
SURNAME FIRST NAME DATE OF BIRTH YEAR LEVEL CLOTHING ALLOWANCE TO BE PAID TO (tick)
SCHOOL PARENT
SCHOOL PARENT
SCHOOL PARENT

BANK ACCOUNT DETAILS OF PARENT/GUARDIAN (Complete only if clothing allowance to be paid to parent)
Payments will only be made by EFT - Please write clearly
Name of Account Holder(s):
BSB Number: (6 digits) Account Number: (up to 9 digits)

PARENT/GUARDIAN DECLARATION
I have not claimed nor do I intend to claim the ABSTUDY School Fees Allowance in 2017.
I have not claimed this allowance for any of these children at another school in Western Australia in 2017.
I authorise the Department of Human Services (Centrelink) to verify my current benefit status and other pertinent details to gain this entitlement.
I DECLARE THE ABOVE TO BE TRUE AND CORRECT AND AM AWARE THAT IT IS AN OFFENCE TO PROVIDE FALSE OR MISLEADING INFORMATION.

PARENT/GUARDIAN SIGNATURE: DATE:

WITNESS DECLARATION (Concession card must be sighted and witnessed at attending school)
I have sighted the claimant's card and confirm the details provided are correct.

PRINT NAME OF WITNESS WITNESS SIGNATURE POSITION HELD DATE
If the form is completed and dated prior to the start of Term 1 complete the commencement confirmation below (tick box and enter current date).
I confirm that the above student(s) has/have commenced at this school in Term 1, 2017 DATE: