
INFORMATION TO PARENTS – APPLICATION FOR FEE REDUCTION

Parents experiencing significant financial difficulties may apply for school fees assistance. In line with the Catholic Education Archdiocese of Canberra and Goulburn Archdiocese Fees Policy, no child is to be denied Catholic schooling simply because of an inability (as opposed to an unwillingness) of a parent/guardian to meet financial requirements.

It is recognised that families make choices and priorities in regards to their standard of living, investments, education and extra-curricular activities. The school considers that families who have chosen a Catholic Education consider it important and that fee payments will be prioritised accordingly.

Fee concession decisions will normally apply to fees in the year in which the application has been submitted. A separate application will be required for concession requests in subsequent years. In some situations, the reductions may be reviewed on a term by term basis, in which case a new application (or updated income information) may be required the beginning of each term.

Government Grants provide part of the funding required to operate the school. The balance of operating costs must be found through school fees. The continued existence of Merici College is dependent on parents paying the required level of fees. Every effort will be made by the School to recover fees from parents who are deemed to have the capacity to pay.

On the basis of the information provided in this form the Fees Committee will determine an appropriate level of fee support based upon guidelines agreed to by the Catholic Education Archdiocese of Canberra and Goulburn and Merici College. All applications will be treated confidentially by the Fees Committee. You may be asked to meet to discuss various aspects of your application. It is necessary that where you are granted a reduction in school fees that you commit to and maintain a suitable payment plan.

If you would like to apply for a reduction in fees, please complete this form and return it to Jodi Wrenford as soon as possible.

All information you provide is treated confidentially

ANNA MASTERS

Principal

APPLICATION FOR FEE REDUCTION

CONFIDENTIAL

DETAILS OF APPLICANTS

Name of Mother/Guardian _____

Are you a single parent household YES/NO _____

Residential Address _____

Home Ph _____ Mobile _____

Occupation _____

Employer _____

Work Ph _____ Full time ☐ Part time ☐ Casual ☐

Name of Father/Guardian _____

Are you a single parent household YES/NO _____

Residential Address _____

Home Ph _____ Mobile _____

Occupation _____

Employer _____

Work Ph _____ Full time ☐ Part time ☐ Casual ☐

DETAILS OF DEPENDANT CHILDREN

Name	Date of Birth	School	Year Group

I/We request a reduction in fees because of:

Low income ☐ Health/Disability Issues ☐ Unemployment/Redundancy ☐

Other ☐ (Please specify in section 'Other Information').

If there is a payment arrangement with another school, please provide details:

Name of School _____ Fees per term _____

APPLICATION FOR FEE REDUCTION

INCOME AND EXPENDITURE			
<p><u>Wages for Mother/Guardian</u> \$ per fortnight</p> <p>Gross _____</p> <p>Tax _____</p> <p>Other Deductions (Please Specify) _____</p> <p style="text-align: right;">Net wages _____</p> <p><u>Wages for Father/Guardian</u> \$ per fortnight</p> <p>Gross _____</p> <p>Tax _____</p> <p>Other Deductions (Please Specify) _____</p> <p style="text-align: right;">Net wages _____</p> <p><u>Other Income / Benefits</u> \$ per fortnight</p> <p>Centrelink /Family Assistance _____</p> <p>Child Support _____</p> <p>Other _____</p> <hr/> <p>TOTAL NET INCOME \$ </p> <p><u>Expenses</u> \$ per fortnight</p> <p>Childcare _____</p> <p>Medical Expenses _____</p> <p>Rent/Mortgage/Board _____</p> <p>Other extraordinary expenses _____</p> <p>(Please specify in section 'Other Information')</p>	<p><u>Assets – what you own</u> \$ estimated value</p> <p>House _____</p> <p>Vehicle/s _____</p> <p>Superannuation _____</p> <p>Investment Property _____</p> <p>Share Portfolio _____</p> <p>Investment Accounts _____</p> <p>Other – (Please specify) _____</p> <p>TOTAL ASSETS \$ </p> <p><u>Liabilities – what you owe</u> \$ estimated value</p> <p>Home Loan _____</p> <p>Car Loan _____</p> <p>Credit card/s _____</p> <p>Other loans _____</p> <p>Other debts– (Please specify) _____</p> <p>TOTAL LIABILITIES \$ </p> <p>NET ASSETS</p> <p>(Assets less liabilities) \$ </p>		
<p>We require copies of the listed documents (only those relevant to your financial situation).</p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <p><input checked="" type="checkbox"/> Please cross or click on the box if completing electronically</p> <p><input type="checkbox"/> Rent receipt or bank/financial institution statement showing mortgage balance and minimum repayment</p> <p><input type="checkbox"/> Health Care Card or Pension Card</p> <p><input type="checkbox"/> Taxation return and Tax assessment statement for the last year</p> </div> <div style="width: 50%;"> <p><input type="checkbox"/> Income statement from Centrelink/Family Assistance Office</p> <p><input type="checkbox"/> Bank financial institution statement showing cash balances for the last 4 weeks</p> <p><input type="checkbox"/> Evidence of Child Support Payments</p> <p><input type="checkbox"/> Pay slips (the last four)</p> </div> </div>			
<p>Please contact us if you need help completing the form or if you require access to a photocopier.</p> <p>If you are self-employed or a shareholder/director of a company that employs you, please contact us for details of the information we will require to allow us to assess your application.</p> <p>We may require an interview to obtain further details to assess your application and we will get in touch with you if this becomes necessary.</p>			
<p>DECLARATION</p>			

APPLICATION FOR FEE REDUCTION

I/We declare and certify that all information contained in this Application is true and correct. I/We will immediately advise the school if my/our financial circumstances change so that the fees payable can be reassessed. I/ We acknowledge our commitment to paying the school fees, and understand that full fees will be due if an agreement with the school is not kept.

Name: _____

Name: _____

Signature _____

Signature _____

Date / /

Date / /

Please ensure you have attached all of the required documents listed above so we can assess your Application.

OTHER INFORMATION

Please include in this section additional information relevant to your application. This may include but is not limited to, costs associated with any medical conditions, childcare costs or extraordinary circumstances. Please ensure supporting documentation is provided.

OFFICE USE ONLY

Pension Card Sighted ☐

All documents attached ☐

Application Received by:

Enrolment signed by:

FAMILY ID _____

Recommendation: _____

Amount Approved: _____

Date of Approval: _____

Approved by Fees Review Committee members:

Signed: _____

Signed: _____

Signed: _____