

# FEE CONCESSION APPLICATION

Catholic schools in our Diocese are accessible to all families willing to support the Catholic ethos regardless of financial circumstances. All information will be treated in the strictest confidence, only the Principal and/or School Finance Officer have access to this application. **A new application for Fee Concession must be made at the beginning of each year.**

**1 Applicant Details:** This form is to be completed by the person responsible for school fees.

Applicant's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_

Student's name/s (ALL): \_\_\_\_\_

**2 Financial Details:** Provide your household's **NET** income. I.e: "take home" wages, Centrelink or other income.

Number of persons residing in the household:  Combined Household's NET Annual Income: \$   
 Total Monthly Expenses: \$  Total Yearly Expenses: \$

The list below will help to identify major expenses, pro rata any quarterly & half-yearly expenses.

List	Monthly Amount	List	Monthly Amount	List	Monthly Amount
Mortgage/Rent		Personal Loan/s		Car Expenses	
Telephone/Mobile		Credit Card		Utilities	
Insurances		Educational Expenses		Household Expenses	
Subscriptions		Medical Expenses		Other:	

**3 Reason for Application:** Please state the reason why you feel special consideration should be applied to your school fees – eg: medical

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**4 Declaration:** I declare that the information supplied in all parts of this application is correct and complete.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**AGREEMENT DETAILS**

Payment Method: BPay / Direct Debit / Cash / Other Agreed Commitment Amount: \$  
 Agreed Frequency of Payments: Weekly / Fortnightly / Monthly / Term Discretionary discount to be applied: \$  
 Comments: .....

I will adhere to the agreed payment arrangement made with the School, as stated above.

**Applicant's Signature:** ..... **Principal's Signature:** .....