

## SCHOLARSHIP APPLICATION FORM

GENERAL APPLICANT INFORMATION	
Student Name:	
Date of Birth:	Gender:
Current School or Preschool:	Current Year Level:
Is the student currently enrolled at St Mary's?	
<i>A student must have a bilateral moderate, severe or profound hearing loss to be considered for a scholarship</i>	

Please complete *either*:

- **PART A** for applications to the Equity Scholarship, or
- **PART B** for the Dominican Scholarship.

### PART A

EQUITY SCHOLARSHIP	
Category applicable	<input type="checkbox"/> Financial Hardship <input type="checkbox"/> Aboriginal and Torres Strait Islander <input type="checkbox"/> Refugee
Please provide details of your current circumstance	
SUPPORTING DOCUMENTATION (please attach evidence to support your application as applicable) <input type="checkbox"/> Wages (after tax) of parent/guardians <input type="checkbox"/> Health Care Card <input type="checkbox"/> House repayments/Rent statement <input type="checkbox"/> Other school fees <input type="checkbox"/> Other supporting documents	

### PART B

DOMINICAN SCHOLARSHIP	
Please provide details of involvement in your current school community.	
SUPPORTING DOCUMENTATION (please attach evidence to support your application as applicable) <input type="checkbox"/> School report <input type="checkbox"/> School awards & certificates <input type="checkbox"/> Participation acknowledgements <input type="checkbox"/> Other supporting documents	

### PARENT ACKNOWLEDGEMENT

I have read St Mary's College scholarship information and understand that:

- My child meets the eligibility criteria for hearing loss
- I must provide information to support my application
- Applying does not automatically confer a scholarship
- All scholarship decisions will be final and at the sole discretion of the Principal of St Mary's College.

**FAMILY INFORMATION**

Parent/Guardian Name:	
Relationship to Applicant:	
Address:	
Telephone:	
Parent/Guardian Signature	
Date:	