

# The Carey College Trust



*"In your light we see light" Psalm 36:9*

## Statement of Financial Position: Application for Scholarship or Financial Assistance

Note: All information is treated in the strictest of confidence.

Name of Child/Children application made for: .....

### Part A: Family Income

		Tick relevant items in these columns			Enter relevant values in this column
<b>1. First Parent/Primary Caregiver</b>	Employment status:	Self Employed	Employed	Not Employed	
Name:.....					
Gross income before tax from employment in the last year:					\$
<b>2. Second Parent/Primary Caregiver</b>	Employment status:	Self Employed	Employed	Not Employed	
Name:.....					
Gross income before tax from employment in the last year:					\$
<b>3. How has this income changed in the last year?</b>		No change	Increased	Decreased	
Please explain:.....					
.....					
<b>4. How might this income change in the next year?</b>		No change	Increase	Decrease	
Please explain:.....					
.....					
<b>5. Other Income:</b>					
Include here other family support, government support or benefits in any form, income from charities, trusts etc:					
Name & details:.....		Annual Value			\$
Name & details:.....		Annual Value			\$
Name & details:.....		Annual Value			\$
Name & details: .....		Annual Value			\$
<b>TOTAL INCOME:</b>					\$

CONTINUE ON THE NEXT PAGE

#### Collection & Use of Information

We collect information according to the principles of the Privacy Act 1993. We have a detailed Privacy of Information Code which you are welcome to read. Its provisions are summed-up in our undertaking to collect information only for the purposes of providing the services we offer, to store that information safely, to give you access to (as well as the right to request amendment of) the information we hold from you, and to keep parents fully informed of all matters relating to their child's school work and conduct. We limit the information given to pupils however. The information we request has been carefully selected because we need it: failure to supply all requested information may result in an application being declined or our services withdrawn. From time to time we send out information on our services and products: if you do not wish to receive this information please advise us.

## Part B: Family Net Financial Worth

6. Do you own or rent your present residence? (tick all relevant)      Own      Rent      Owned by Family Trust

7. Please add the dollar value of all specified assets and liabilities/debt that you have in the table below. Please fill in **every box** and write '0' (zero) if the value is 0 (nothing).

Family Assets		Family Liabilities	
7a. Cash (including term deposits and funds held in savings accounts)	\$	7f. Total amount owing on any mortgage(s)	\$
7b. Total value of all property owned (including houses, land, buildings)	\$	7g. Total amount owing on cars, boats, and recreational vehicles	\$
7c. Total market value of any business interests	\$	7h. Total amount owing on student loans	\$
7d. Total resale value of cars, boats and recreational vehicles	\$	7i. Amount owing on credit card(s) (including store cards)	\$
7e. Total value of investments	\$	7j. Amount owing on other loans (secured or unsecured)	\$
<b>TOTAL ASSETS:</b>	\$	<b>TOTAL LIABILITIES:</b>	\$

8. Is the student and/or any of the student's primary caregivers beneficiaries of any trusts?

Please tick one and cross out the other:

Yes

No

*If "no" please go directly to Part C Statutory Declaration below. If "yes" please complete the table below:*

8a. How many trusts? .....	
8b. What type of trusts are these? ..... .....	
8c. What is the total value of assets in these trusts?	\$
8d. What is the total income received from these trusts in the last year?	\$

## Part C: Statutory Declaration (To be filled out by hand)

This statutory declaration must be witnessed by a **solicitor**, a **Justice of the Peace**, a **Court Registrar**, or **other person authorised** to take a statutory declaration. There are penalties under the Crimes Act for providing false information and provision of false information will also result in the termination of the scholarship or financial assistance.

I .....  
(full name of primary parent or caregiver)

of .....  
(full home address)

solemnly and sincerely declare that the information I have provided in this application is true and correct. I make this declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Signature: ..... Date: ..... Declared at: .....

**Witness:** Signature: .....

Name in full: ..... Occupation: .....

Address in full: .....