Student Assistance Application Form

Request assistance due to financial hardship

We understand that the cost associated with some activities beyond the core curriculum may be difficult for some families to meet at times due to financial hardship. As instruction in public schools is provided free of charge in NSW for every child, the school provides financial support in these circumstances.

We invite families who require assistance due to financial hardship to fill in this form and send it to: innersydney-h.school@det.nsw.edu.au Att: School Admin Manager, or to speak confidentially with the principal or with a member of the school's office staff. Equitable access to learning opportunities and experiences is a core principle of public education. Every reasonable endeavour will be made to accommodate this request.

Student Name: _____ Year: _____

Parent/Guardian name: _____ Phone: _____

Email Address: _____ Date of request: ____/____/_____

Reason(s) for assistance:

_____

_____

_____

_____

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_____

For the selected school activity, please select whether you would like to request a payment plan or for the school to cover the cost of the activity (or both)		
☐	Payment plan request	Please nominate the amount you can contribute. I can pay: Weekly $_____ Fortnightly $_____ Monthly $_____
☐	Amount requested for school to cover	Please nominate the amount you would like the school to cover. $_____

Parent/caregiver signature: _____ Date: ____/____/_____

OFFICE USE ONLY

Principal decision: ☐ Approved ☐ Declined

Principal signature: _____ Date: _____