



Scholarship Application

This form is to be completed by a parent or guardian of the answers.	ne grant applicant. Attach separate sheets if you require additional space for
Is your child a permanent resident of Tasmania?	Yes □
For proof of residence, please attach 1 copy of a you could provide one of the following document Drivers licence Vehicle registration Electricity bill Phone bill Rates notice Bank or credit card statement	a recent notice/document that includes your name and address. For example, ts:
Have you read Variety's Scholarship Guidelines?	Yes □
Secti	on 1. Child's Details
Full Name:	
Age:	
Date of birth:	
Gender:	
Description of child's sickness, disability or disadvantag	e:
Are you a single parent household?	es 🗆 No 🗆

If yes, please complete Section 2 – Parent/Guardian's Details on the next page and skip Section 3.





Section 2. Parent or Guardian 1 This person will be the main contact for your child's application.				
Parent or Guardian 1 Full Name:				
Street address:				
Suburb:	State:		Post Code:	
Phone (H):		Phone (M):		
Email:				
Relationship to Child: Parent □ Guardian □ Foster Carer □ Grandparent □ Other (please specify) □:				
Secti	on 3. Parent or Gua	rdian 2 (if appli	cable)	
Parent or Guardian 2 Full Name:				
Relationship to Parent/Guardian 1: Husb	and □ Wife □ Pa	artner/Defacto □	Other: □	
Other (please specify) □ :				
Section 4. Dependents				
No. of dependants (under 18 years):		Ages:		
Section 5. Goals & Aspirations				
Select your child's area of interest (please	tick below):			
☐ The Arts (performing of visual arts)	☐ Sport	☐ Education	☐ Business	





Section 5. Goals & Aspirations (cont)		
What are your child's goals for this area of interest?		
What are the major achievements that your child has accomplished to date, in their chosen area of interest (if any)?		
How has your child demonstrated their commitment to their area of interest so far?		





Section 5. Details of Request		
Provide a brief description of the items or services that you require funding for:		
Describe how the requested item or services will benefit your child, enabling them to further develop their talent or skills in their area of interest:		
Section 6. Equipment Costs		



Attach 2 quotes for each of the items or services requested.

Please give a breakdown of all costs related to your funding request:

Date of Activity/Equipment/Service	Cost





Section 6. Equipment Costs (cont.)		
Total cost of items or services:		
Amount requested from Variety:		
Are you able to make any financial contribution to this application? Yes □ No □ If yes, how much are you able to contribute?		
Section 7. Income Details		
Please provide details of your net fortnightly income for the categories below (where applicable): Paid employment Government Assistance		
If self-employed, estimate your 'average' net fortnightly income, based on your business's financial records and answer next to 'paid employment').		
Paid Employment of Parent Guardian 1: (Net fortnightly income) Attach to this application, copies of 4 recent payslips. If self-employed, please attach the most recent ATO notice of assessment/tax return.		
Paid Employment of Parent Guardian 2: (Net fortnightly income) Attach to this application, copies of 4 recent payslips. If self-employed, please attach the most recent ATO notice of assessment/tax return.		
Government Assistance of Parent Guardian 1: (Net fortnightly income) Attach a Centrelink Statement to this application.		
Government Assistance of Parent Guardian 2: (Net fortnightly income) Attach a Centrelink Statement to this application.		
Section 9 Other Income Dataile		

Section 8. Other Income Details If you receive any other form of income, e.g. investment or other, please give details:





Section 9. Total Ho	usehold Income		
Please provide the grand total of your household's fortnightly income, if any.	me. Paid employment + government assistance + other		
Total household income: (Net fortnightly income)			
Section 10. Financia	I Considerations		
Current housing situation: Renting ☐ Mortgage ☐ Govern	ment Housing Assistance □		
Other (please specify) □:	mont riodsing / toolstanee 🗅		
List any extraordinary expenses that are over and above normal liv	ving expenses (if relevant):		
Have you received assistance from Variety previously? If yes, please provide brief details:			
Section 11. Recommer	ndations & Support		
Attach letters from at least 2 referees, as per categories be	elow:		
• Coach			
• Doctor			
Medical specialistSchool teacher			
• Educator			
Social Worker			
Other (please specify below)			
Referee 1			
Referee 1 Name:			
Organisation:			
Position:			
Phone:	Email:		





Section 11. Recommendations & Support (cont.)		
Referee 2		
Referee 2 Name:		
Organisation:		
Position:		
Phone:	Email:	
Continue d	2 Canada	
Section 1.	2. Consent	
I/We give my/our consent for Variety to generate publicity through presentation, should this application be successful:	gh print and electronic media and/or participate in a	
□ Yes □ No		
I/We confirm that should my child's Scholarship Application be successful, my/our child will be able to attend the Scholarship Award luncheon on 27th May 2016, which will be on a school day:		
□ Yes □ No		
I/We would like to join Variety Tasmania's mailing list, to receive	· Variety's latest news:	
□ Yes □ No		
Section 1	3. Referral	
How did you hear about Variety?		
□ Variety website □ Social Media (e.g. facebook) □ Press (e.g. newspaper, radio, etc) □ Referee (e.g. therapist, doctor, etc) □ Word of mouth □ School □ Other (please specify)		





Section 10. Privacy Collection Statement & Understanding

Your privacy is respected by Variety. The personal information you provide on this form (including sensitive information about health) will be used to assess your eligibility. It may be provided to organisations that assist us, or as required or authorised by law, but we will not use any of your sensitive information for marketing purposes, without your prior consent. If you have any privacy concerns or would like to verify information held about you please contact Variety the Children's Charity Tasmania PO Box 789, ROSNY PARK TAS 7018. Tel: (03) 6248 4888.

Submission of the application to Variety does not expressly or impliedly mean that Variety has accepted your application. Variety is under no obligation legal or otherwise to process your application to a successful conclusion. Each application will be determined on its merits, and within Variety's funding guidelines. Variety is not liable for any loss or damages whatsoever upon your application being declined.

By forwarding this application to Variety, you acknowledge that any and all implied terms and conditions or warranties implied by law are excluded. You acknowledge by making this application that Variety has not made any representation, or given any promise or undertaking, as to the fitness of any equipment or product sought to be supplied to you in pursuant to this application. It is solely for you to determine whether the equipment or product being sought is fit for its purposes. Variety may arrange for the supply and delivery of equipment or a product, but is neither the vendor nor the supplier of any equipment or product. Accordingly, Variety will not be responsible for any direct or consequential loss or damage arising or related in any way to this application or its subject matter.

As Parent or Guardian, I consent to Variety collecting the information provided on this form. I have read and agree to Variety Tasmania's Guidelines and Privacy Collection Statement & Duderstanding. I understand that if I do not provide the information requested, I may be ineligible to receive assistance from Variety.

Signature:
Printed Name:
Date:





Before sending your Application · · · please check!

Have you answered all questions thoroughly?	
Are copies of the following documents attached?	
Payslips	
Centrelink statement s	
ATO Notice of Assessment/Tax return (if self-employed)	
Quotes	
Letters of support	

Returning your Application

Please post or email your completed Application to:

Variety the Children's Charity Tasmania PO Box 789 ROSNY PARK TAS 7018

admin@varietytas.org.au

If you have any questions or require assistance in completing the form, please do not hesitate to phone Variety's office on (03) 6248 4888 or email admin@varietytas.org.au. A friendly representative will be happy to assist you!