

# Application for Secondary Rural Boarding Bursary For School Year 2021

www.bcef.org.au

## **Guidelines for Applicants**

## You must provide

1. Your 30 June 2020 ATO Tax Notice of Assessment for each member of the household and any business or trust accounts

#### **AND**

2. Proof of LAFHA and/or AIC Assistance must be included in your application

## Background

Our Secondary Rural Boarding Bursary is designed to assist economically disadvantaged and remote students within rural regions to attend a NSW State or Independent rural boarding school. It assists with bridging the gap between the cost of rural boarding and funding received through the AIC allowance (Assistance for Isolated Children – Federal support) and/or the LAFHA (Living Away From Home Allowance – NSW support). Families with children who weekly or full time board in NSW at a rural school, boarding facility or live with a family member are eligible to apply.

### Value

Our Secondary Rural Boarding Bursary is awarded for one year and is currently available to a maximum of \$2,000 depending on need and at the discretion of the Board. Payment is made in instalments directly to the school.

Our bursary is awarded on the basis of:

- · family income
- geographical isolation from an appropriate NSW Governmet school
- any exceptional circumstance which meet our criteria, but not limited to, for instance impact of environmental events, student educational needs, family crisis etc.

Applicants must reapply each year.

#### Conditions

The number of bursaries allocated each year, and the amount of each bursary, is governed by the level of donations. The Directors of the Foundation will administer this program at their discretion and will adjust or withdraw a bursary benefit in the event of changed circumstances.

Completed application forms and all required supporting documents to be submitted by Friday, 26 February 2021

**Bush Children's Education Foundation of NSW Inc.** 

Postal Address: PO Box 138 Email: info@bcef.org.au

LINDFIELD NSW 2070 **Tel**: 0492 878 622

## Application cannot be processed unless all questions are answered

## Student Details

FAMILY NAME
FIRST NAME(S)
ADDRESS
TOWN POSTCODE
TOWN
DATE OF BIRTH AGE MALE FEMALE
Cohool Dataile
School Details
2021 SCHOOL YEAR YOU ARE APPLYING FOR
DISTANCE BETWEEN HOME AND THE NEAREST GOVERNMENT SCHOOL (KMS)
NAME OF SCHOOL ATTENDING IN 2021
ADDRESS OF SCHOOL
ASSISTED OF GOING E
Fees (Enter total fees for school year 2021)
\$
WEEKLY BORDER FULL BOARDER
Student Details
Enter the value of each allowance received or applied for
(you must be in receipt of AIC with additional supplement and/or LAFHA)
ASSISTANCE FOR ISOLATED CHILDREN (AIC)  AIC SUPPLEMENT
\$
LIVING AWAY FROM HOME ALLOWANCE (LAFHA)  LAFHA SUPPLEMENT - YEARS 11/12
\$
YOUTH ALLOWANCE ABSTUDY
\$
AG HIGH BOARDING SCHOLARSHIP - ISOLATED STUDENT ANY OTHER SCHOLARSHIP / BURSARIES
\$ \$
FROM:
Vhere you can receive assistance for Isolated Students

## **Commonwealth Government**

AIC (Isolated Students) Centrelink Tel 13 23 18 Youth Allowance Tel 13 24 90 Abstudy Tel 13 23 17

## **NSW Government**

Tel (02) 6334 8075 (Bathurst) Living Away from Home Allowance - LAFHA

Family Assist Tel 13 61 50

Details Parent / Guardian 1		Details Parent / Guardian 2
TITLE		TITLE
MR MRS MS MISS	OTHER	MR MRS MS MISS OTHER
FAMILY NAME		FAMILY NAME
FIRST NAME(S)		FIRST NAME(S)
THO TOME(O)		THO HAME(O)
ADDRESS - IF NOT THE SAME AS STUDENTS		ADDRESS - IF NOT THE SAME AS STUDENTS
TOWN	POSTCODE	TOWN POSTCODE
PHONE MOBILE		PHONE MOBILE
EMAIL		EMAIL
RELATIONSHIP TO STUDENT		RELATIONSHIP TO STUDENT
YOUR OCCUPATION		YOUR OCCUPATION
AGE OF OTHER DEPENDENT CHILDREN		AGE OF OTHER DEPENDENT CHILDREN
Family Income		
•		
Please attach, all personal, busine	ess and trust ATC	O Notice of Assessments for 30 June 2020 for yourself
and your spouse or partner.		
TAXABLE INCOME PARENT / GUARDIAN 1		TAXABLE INCOME PARENT / GUARDIAN 2
IF A PENSIONER - TYPE		IF A PENSIONER - TYPE
II AT ENGIONER - TITE		II AT ENGINER - TITE
IF A PENSIONER - AMOUNT PER FORTNIGHT		IF A PENSIONER - AMOUNT PER FORTNIGHT
PLEASE INDICATE IF THERE IS ANY OTHER INCOM	E IN YOUR HOUSEHOLD	PLEASE INDICATE IF THERE IS ANY OTHER INCOME IN YOUR HOUSEHOLD
STATE FORM OF OTHER INCOME		STATE FORM OF OTHER INCOME
AMOUNT		AMOUNT
AMOUNT		ANIOUNT
Farm / Grazing Data		
AREA OF YOUR HOLDINGS IN HA		OWNER MANAGER
ALLA OF FOOR HOLDINGO IN HA		THE
AVERAGE NO. OF SHEEP AVERAGE NO.	O. OF CATTLE	TOTAL CULTIVATION AREA

## **Additional Information**

Please provide **any additional** information to support this application such as the impact of climate events or conditions, restocking, educational needs of your child etc.

## **Declaration**

Please note in submitting an Application for a 2021	BCEF Secondary Rural Boarding Bursary you are
aware and agree to the following:	

	BCEF can request the allowance status (AIC and/or LAFHA) of the student named in the application from the School, Federal or State Government agencies. This information will be released to BCEF for discretionary use whilst considering the application.			
2.	Consent for the School to provide BCEF with student attendance and overall performance.			
	I have read, understand and agree to the above conditions			
3.	BCEF likes to use images (or other media material) of students for fundraising, promotions and/or marketing. Details of our Media Policy and use are on our website: bcef.org.au. All use would be treated according to the Bush Children's Education Foundation Privacy Policy. Would you be willing for us to use images of the student named in the application for these purposes?			
	I grant permission			
4.	How did you hear about BCEF Rural Boarding Bursaries?			
All Applications will be treated according to The Bush Children's Education Foundation Privacy Policy.				
Check list for completing the application form.				
	30 June 2020 ATO Notice of Assessment Statement			
	Proof of LAFHA and/or AIC or any other assistance.			
	Name of Rural Boarding School			
	Distance from closest secondary school			
	Income of parents/guardians/business/trusts			
	Any additional information to support the application			
Ву	signing or filling in the signatory section below, I certify all information is true and correct.			
Si	gnature of Parent/Guardian: Date: Date:			