AL SADIQ COLLEGE

بِسْمِ اللَّهِ الرَّحْمَٰنِ الرَّحِيمِ

In the Name of Allāh, the Most Gracious, the Most Merciful

AL SADIQ COLLEGE
FINANCIAL ASSISTANCE REQUEST APPLICATION FORM

Date: _____ **Family TASS ID:** _____

Please read carefully, before placing your application.

At Al Sadiq College, we are committed to supporting families who may be experiencing genuine financial hardship, ensuring every student has access to quality education. To facilitate a thorough and fair assessment of your application for financial assistance, we require specific financial documents that provide insight into your current financial circumstances. These documents include but are not limited to the following:

- Copy of the last two pays lips / Centrelink income Certificate
- Notice of tax assessment or declaration of income endorsed by tax office
- Bank statements for the last 12 months (including home loans)
- Credit Card Statements for the last 12 months
- Any other information or documentation you believe relevant to assist us in assessing your request

These documents will enable the College to review your situation accurately and determine eligibility for assistance based on financial need. Please note that all information provided will be treated with the utmost confidentiality and used solely for the purpose of assessing your application.

We appreciate your cooperation in supplying the necessary documentation and encourage you to contact our Accounts Receivable Office if you have any questions or require assistance with the application process.

Please note that all Financial Assistance Approvals are granted for a period of 12 months. At the end of this period, a review will be conducted to reassess eligibility.

Reason for Applying

Widower ☐ Unemployment ☐ Financial Hardship ☐ Other ☐

If you ticked Other, please state reason _____

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Name of supporting parent 1 _____

Occupation: _____

Full time ☐ Part time ☐ Self-employed ☐ Casual ☐ Home Duties ☐

Number of Dependents _____ Marital Status _____

Address _____

Email _____

Contact telephone numbers – Home: _____ Mobile: _____

Name of supporting parent 2 _____

Occupation: _____

Full time ☐ Part time ☐ Self-employed ☐ Casual ☐ Home Duties ☐

Number of Dependents _____ Marital Status _____

Address _____

Email _____

Contact telephone numbers – Home: _____ Mobile: _____

CHILD NAME	YEAR LEVEL	SCHOOL ATTENDING

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Have you received assistance before: Yes ☐ No ☐

Type of Assistance you are looking for _____

Discount Amount Required _____

Do you hold or have you applied for a Bursary or a Scholarship: Yes ☐ No ☐

What Period is the Assistance required for _____

How much can you currently afford paying towards your account?

Amount _____ Frequency _____

Were you receiving Family Tax Benefit as at the end of this financial year? Yes ☐ No ☐

Does anyone else contribute to the costs of the education of your child Yes ☐ No ☐

Please describe your financial circumstances and /or your background which might help us understand more about your financial position:

_____

_____

_____

_____

_____

_____

_____

_____

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Statement of Financial Position as at Month _____Year _____

ANNUAL INCOME - DETAILS OF WHAT YOU EARN	
Salary/Wages/Income	
Gross Annual Salary/ Wages/ Income - Parent 1	
Gross Annual Salary/ Wages/ Income - Parent 2	
Other Income	
Bonuses, Overtime etc.	
Interest	
Child Support	
Centrelink Benefits	
Income from Investment properties, dividends, other investments	
Any other income	
Total Annual Income	$

If you need to provide any additional information to help us understand the above, please do so here:

ANNUAL EXPENDITURE – DETAILS OF YOUR EXPENSES	
Annual Home loan repayment	
Annual rental expenditure	
Other personal loans	
Educational expenses	
Other expenses	
Total Annual Expenditure	$

If you need to provide any additional information to help us understand the above, please do so here:

AL SADIQ COLLEGE
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Statement of Financial Position as at Month _____ Year _____

ASSETS AND LIABILITIES	
Value of Assets – Details of what you own as at (Month _____ Year _____)	
Value of residential Home	
Total value of investment properties	
Total value of shares and other financial investments	
Total value of motor vehicles, boats, and caravans	
Any other assets (e.g., jewellery, art works)	
Total Value of Assets	$

If you need to provide any additional information to help us understand the above, please do so here:

_____

_____

_____

ASSETS AND LIABILITIES	
Value of Liabilities – Details of what you owe as at (Month _____ Year _____)	
Outstanding mortgage on residential home	
Outstanding mortgage on investment properties	
Outstanding loans on cars, boats, caravans	
Outstanding loans to finance shares and other financial investments	
Other personal loans, debts, and credit card balances	
Total Liabilities	$

If you need to provide any additional information to help us understand the above, please do so here:

_____

_____

_____

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MY MONTHLY EXPENSES			
(Money you spend – do not include loan repayments)	**$ per Week**	**$ per Month**	**$ per Year**
Ongoing Rent/Board			
Absolute Basic Expenses			
Groceries			
Transport			
Petrol/Gas			
Registration			
Car Insurance			
Tolls			
Parking			
Utilities (Power, Gas, Water)			
Power			
Gas			
Water			
Rates			
Clothing			
Other expenses (please specify):			
Education Expenses (Activity/Elective levy's)			
Uniform Fees			
School Bus Fees			
Childcare Fees			
Child Support/Maintenance/Alimony			
Insurance			
CTP			
Building			
Contents			
Health			
Life Insurance			
Income Protection			

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Holidays			
Entertainment			
Birthday Parties/Functions			
Gym Membership			
Cleaning			
Gardening Services			
Laundry			
Total Expenses			

Declaration

I / We confirm that the information contained in this application is correct

Supporting Parent 1 Signature _____ **Date** _____

Supporting Parent 2 Signature _____ **Date** _____

Office Use Only

Application received by _____

Date _____ Meeting Date _____

Time _____

Type of Assistance Recommended to Finance Committee _____

Proposal date _____ Submitted on _____

Approved Yes ☐ No ☐ Amount Approved _____

Letter to Family Yes ☐ No ☐ Date _____