## MARGARET RIVER SENIOR HIGH SCHOOL



Sudependent Public School
158 Bussell Highway, Margaret River, W.A. 6285
Phone: (08) 9757 0700 Fax: (08) 97570764
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Principal: Andrew Host B.Ed., Dip. Ed.

## FINANCIAL HARDSHIP FORM

Margaret River Senior High School is committed to supporting the community by recognising challenges that may result in financial hardship for some parents/guardians. By answering the questions below with as much information as you can, MRSHS will be able to assess what assistance is best suited to support you under our Financial Hardship Policy. A person will be considered to be in financial hardship if paying their charges and contributions will affect their ability to meet their basic living needs

| Student Name              |  |   |  |
|---------------------------|--|---|--|
| Parent/Guardian Name      |  |   |  |
| Phone                     |  |   |  |
| Email Address             |  |   |  |
| Postal Address            |  |   |  |
| Total Outstanding Balance |  |   |  |
|                           |  |   |  |
|                           | ou sought financial ass<br>ase provie a letter from them sup<br>No   |   |  |
|                           | have a Health care can can receive up to \$350 to help p   |   |  |
| □ Yes                     | s □ No   |   |  |
| How ha                    | I have become unemplo<br>My hours have been reduce<br>My pay has been reduce<br>I have been stood down<br>I have experienced sign<br>— pleas | mentation from your Employer, ATO or Department of Health lived — please advise from when |  |
|                           |  |   |  |

| How long do you expect to experience financial difficu  | ulty?  |
|---|--|
|   |  |
| How much time do you need to pay your school fees?  |  |
| Thow much time do you need to pay your school lees:   |  |
|   |  |
| What amount do you think you could afford to pay per  | r fortnight towards your school fees?  |
|   |  |
| ., .  | lication which may include: bank statements, Centrelink cal certificate confirming inability to work, disconnection notice for r notice of impending legal action. |
| Payment Type  |  |
| <ul> <li>□ Payment Plan: Parent sets up the payments automa</li> <li>□ Direct Debit</li> <li>□ Credit Card</li> </ul>   | atically using their own internet banking  |
| What type of assistance are you seeking?  □ Payment Plan (monthly, fortnightly or weekly p □ Payment due date extension □ Other – Please provide specific information out |  |
| Please return the application to:   |  |
| The Manager of Corporate Services Email: accounts.margaretriver.shs@education.wa.edu.   | au   |
| Declaration   |  |
| I,  | confirm the information provided is correct.   |
| Signature   | Date   |
| What happens after I lodge my application?  |  |

- The application and supporting documentation will be registered upon receipt
   The application will be forwarded to the Manager of Corporate Services or delegate for assessment.
- 3. You will be contacted to discuss a payment arrangement.
- 4. Please note failure to adhere to the above commitment & payments will result in your debt being referred to a debt collection agency.