Norfolk St. Coorpargo, 4151 ph. (07) 3397 7125 fax: (07) 3847 2792 www.mtcarmelcoorpargo.gld.edu.au

"Application for Concessional Fees"

Family Information:				
Family Name:	Address:			
Father's/Guardian's Name: Resides with family? Yes / No (please circle)				
Work Phone:	Home Phone:	er: Mobile:		
Mother's/Guardian's Nar	me: Re	sides with family? Yes / No (ple	ease circle)	
Occupation:	Employe	er:		
Work Phone:	Home Phone:	Mobile:		
Dependants- Include dep	endents residing with you	in full time study and those un-	der school age children.	
Name:	Age:	School:		
Name:	nme: School:			
		School:		
Name:		School:		
Financial Informatio				
Financial Informatio Income Weekly	n: Father/Guardian	Mother/Guardian	Total	
Income -Net after tax	\$	\$	\$	
Dependent's Income –	\$	\$	\$	
Youth Allowance				
All other Centrelink	\$	\$	\$	
Payments				
Investment Income	\$	\$	\$	
Child Support Income	\$	\$	\$	
Other Income	\$	\$	\$	
	Total Combined	d Weekly Income	\$	
Expenditure Weekly				
Housing Mortgage or Rental			I \$	
Estima	ated weekly expenditure (e	eg grocery, electricity, rates, etc) \$	
	Total	Combined Weekly Expenditure		
Net Income Total Income – Total Expenditure = Net Income			\$	
Note: Please supply copie	es of all Income and Expend	liture (eg: payslips, Centrelink/\	Youth Allowance notices and	
rent/mortgage payments	s. All information is treated	confidentially.		
Applicant's Signature	e – (must be signed on lod	gement of application)		
We/I request considerati	on of our application for co	oncessional fees for our child/cl	hildren's education. We	
understand that concess	ioinal fees will be granted i	n respect of tuition fees and bu	iilding fund only.	
Concessions cannot be g	ranted on other fees and le	evies.		
Parent's/Guardian's Signature			Parent's/Guardian's Signature	
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Annual Assessment

Adjusted Financial Arrangements

Student Name/s		Class			
	Actual Charges per	The amount of concession is	Total amount to pay		
	\$	\$	\$		
Tuition Fee					
Resource & Activity					
Levy					
Compulsory Capital					
Levy					
Voluntary P&F Levy					
Other –eg: Camps					
Total charged to you for Term/Month/Fortnight/Week = \$					
This concession covers the period from //2013 to //2013.					
On behalf of Our Lady of Mt Carmel Catholic Primary School I hereby make the above offer in respect of fees. If you wish to accept this offer please sign and return to the school immediately. No reduction can be made to your fees until the signed form is returned.					
Parent's/Guardian's Signature Parent's/Guardian's Signature Principal's Signature					