



Please tick the scholarship you are applying for:

- | | | |
|--|---|--|
| <input type="checkbox"/> Cultural Scholar in Residence | <input type="checkbox"/> Reverend Bertram Wyllie | <input type="checkbox"/> Prof Dennis A Ahlburg |
| <input type="checkbox"/> Dr David Greatorex | <input type="checkbox"/> Reverend Norman Webb | <input type="checkbox"/> WCF Indigenous Scholarship Endowment Fund |
| <input type="checkbox"/> Jessie Hope Paterson | <input type="checkbox"/> John Lindsay Allen | <input type="checkbox"/> WCF Indigenous |
| <input type="checkbox"/> Linden Edwards | <input type="checkbox"/> Joint USyd Sport & WC | <input type="checkbox"/> Dr Allan Bromley |
| <input type="checkbox"/> Edwin Hocking Remote | <input type="checkbox"/> Joint FEB & WCF Indigenous | <input type="checkbox"/> Frank Simpson (not available for 2010) |

(See Scholarships Information Sheet for more information about each Scholarship)

Name _____

Home Address _____

Telephone _____ Fax _____ Email _____

Have you applied to Wesley College ? (Yes/No) (Please circle)

Proposed University Course and Year _____

Date of Birth _____ Place of Birth _____

Are you of Aboriginal or Torres Strait Islander descent? (Yes/No) (Please circle) Give details _____

If yes, have you registered with the University of Sydney's Koori Centre as a Cadigal student? (Yes/No) (Please circle)

Have you applied for ABSTUDY? (yes/no) (Please circle) (Please provide Centrelink confirmation/information regarding your application, even if you were not eligible to receive ABSTUDY)

Academic and Community Record

School _____

UAI (or equivalent) _____

Academic Record _____

Community, Church, Sporting and Other involvement _____

Financial Situation

Will it be necessary to work to support your studies in 2010? Yes/No (Please circle)

If Yes, will it be necessary for you to work

- (a) during semester? Yes/No (Please circle)
- (b) during vacations? Yes/No (Please circle)

Do you expect to receive funds from the following sources? If Yes, give details

Youth Allowance/other Centrelink based funding Yes/No (Please circle and specify) _____

How much do you expect to receive? _____

Did you receive Youth Allowance/Abstudy etc. in 2009? Yes/No (Please circle)

If Yes, how much per fortnight? _____
(Please provide documentary confirmation)

Will you receive assistance from your parents? Yes/No (please circle & list below)

Fees? \$ _____

Living Allowance? \$ _____

Books/equipment? \$ _____

Other? \$ _____

How many dependent children are in your family? _____

Parents' Employment

Father _____ Full Time/Part-time (Please circle)

Mother _____ Full Time/Part-time (Please circle)

Total Gross Family Income in 2009 _____
(Please provide a 'Tax Notice Assessment' for 2008-09)

Total Gross Family Income expected in 2010 _____

Other Scholarship support Yes/No (Please circle)

Name and details and amount _____
(Please provide documentary confirmation)

Are there any other factors you would wish to mention? _____

CONFIDENTIAL

Please tick the scholarship(s) you are applying for:

- | | | |
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Eligibility please outline the reason why you think you would make a suitable recipient of this scholarship

What will you contribute to College Life? _____

What will receiving this scholarship do for you? _____

As a scholarship recipient how would you see yourself giving back to Wesley in the short term and the long term? _____

Other information which you would like to provide to support your application

If you are applying for the following Scholarships, please answer the relevant questions below.

Frank Simpson Scholarship Q 1 (not available in 2010)

Sporting Scholarship Q 2

Q 1. Please give details of your commitment to practicing medicine in rural or regional areas of need.

Q 2.

Detail sporting activity noting representative honours, dates and the level attained. Be quite specific and affix these details to your application. _____

Referees

Referees' Reports of your sporting achievement will be an essential aspect of your application. At least two of these references should be from coaches and sporting administrators. These references will be checked and referees may be contacted.

1.Name _____
Position _____
Address _____
Phone _____ Fax _____ Email _____

2.Name _____
Position _____
Address _____
Phone _____ Fax _____ Email _____

3.Name _____
Position _____
Address _____
Phone _____ Fax _____ Email _____

Scholarships Applicant Consent Form

This consent will be used for the sole purpose of authorising Centrelink to provide information to Wesley College to assess your eligibility in relation to concessions or services provided by Wesley College:

Income Confirmation

I, (print name of applicant) _____ authorise Centrelink to electronically provide a statement of information to Wesley College to assist in the assessment of my entitlement to services from Wesley College. I understand that the information provided by Centrelink may include, where relevant, current or historical details of payments received, dependants, Centrelink deductions, income, assets and confirmation of my current address.

I understand that this authority, once signed, is effective only for the period I am a customer of Wesley College. I understand that this authority, which is ongoing, can be revoked at any time by giving notice to Wesley College. I understand that I will be able to obtain a written copy of the Statements at any time from either Wesley College or Centrelink. A brochure is available from Centrelink that provides more details about the Centrelink Confirmation eServices or on Centrelink's website at www.centrelink.gov.au.

STATUTORY DECLARATION BY APPLICANT (to be completed before a J.P)

I, _____ of _____

Do solemnly and sincerely declare that the particulars I have given are true and complete in every respect and I make this solemn declaration conscientiously believing the same to be true and in virtue of the provisions of the Oaths Act, 1900.

Signed _____

Made and signed before me at _____

This _____ day of _____ 200_____

.Signature of Justice of the Peace _____