

SCHOLARSHIP APPLICATION FORM

About CCEF

The Caroline Chisholm Education Foundation (CCEF) is an independent charitable trust at Chisholm Institute. The mission of the CCEF is to support those in financial hardship to receive an education at Chisholm Institute by providing full and partial scholarships to cover cost of tuition and material fees.

SCHOLARSHIP ELIGIBILITY

To find out if you meet the criteria for a scholarship, please complete the self-assessment below by ticking the boxes that are applicable to you:

- Your course of study will be at Chisholm Institute
- You are one of the following: Australian Citizen, or Permanent Resident
- You are in possession of a current Concession or Health Care Card
- You and your course is eligible for one of the following:
- Government-subsidised training¹
 - VET student loan (if applying for Diploma level or above).²
- You have a current health care card or are listed on your parent's Health Care Card

PLEASE NOTE: If you identify as being of Aboriginal and/or Torres Strait Islander descent please refer to the **Scholarship Application Form for Indigenous Students**.

APPLICATION PROCESS

- > Once eligible to apply for a scholarship, you will apply for your selected course online, if you have not already done so.
- > A Chisholm course adviser or the relevant teaching department will be in contact to assist you with your enrolment documents.
- > Complete and submit the scholarship application form including ALL documents as listed in this application form. (See the document checklist on page 7).
- > We will let you know whether you need to register to meet with a career guidance counsellor to discuss your application further.
- > Our scholarship panel will then meet to assess your application, and you will be notified by email of the outcome.

DO NOT PAY YOUR COURSE FEES BEFORE HEARING THE OUTCOME OF YOUR SCHOLARSHIP APPLICATION AS THE CCEF IS UNABLE TO REFUND STUDENTS.

PLEASE NOTE: The application process may take up to four (4) weeks, therefore it is recommended you allow plenty of time between submitting your complete application and the commencement of your course.

1. See chisholm.edu.au/fees on Government subsidy eligibility.

2. See chisholm.edu.au/VSL for information on VET Student Loans.

PERSONAL DETAILS

First name	Last name
-------------------	------------------

Preferred name	Date of birth / /
-----------------------	--------------------------

Gender	Female <input type="checkbox"/>	Male <input type="checkbox"/>	Indeterminate/Intersex/Unspecified <input type="checkbox"/>
---------------	--	--------------------------------------	--

Residential address

Suburb	State	Postcode
---------------	--------------	-----------------

Mobile phone (required)	Chisholm student number (If applicable)
--------------------------------	--

Email address (required)

CITIZENSHIP DETAILS

What is your country of birth?

Are you an Australian Citizen? Yes No

If born in Australia, you must provide a colour copy of your Medicare Card.

If you were not born in Australia and have become an Australian Citizen, you must provide a colour copy of your Australian Passport or Citizenship documents.

Non-Australian Citizens

Are you a Permanent Resident? Yes No

You must provide a colour copy of your Visa documents. (An Immigration Card is not accepted.)

CENTRELINK DETAILS

Are you in receipt of a Centrelink payment? Yes No

Do you have a current concession or health care card? Yes No

Are you listed on your parent/s or guardian/s health care card? Yes No

GENERAL DETAILS

Have you previously received a scholarship from the Caroline Chisholm Education Foundation? Yes No

If yes, please provide the following details:

Course name	Year
--------------------	-------------

How did you hear about us?

<input type="checkbox"/> Chisholm website	<input type="checkbox"/> Teacher
<input type="checkbox"/> External agency	<input type="checkbox"/> Chisholm course advisor
<input type="checkbox"/> Open night	<input type="checkbox"/> Other

ENROLMENT DETAILS

Before you are able to complete this section, you must have contacted a course adviser or department course adviser to commence your enrolment. They will be able to help you to commence the enrolment process:

- > Statement of fees
- > Textbook/equipment list (if applicable).

These documents are required for your application to be processed.

Full name of course

- | | |
|--|---|
| <input type="checkbox"/> Certificate I | <input type="checkbox"/> Certificate II |
| <input type="checkbox"/> Certificate III | <input type="checkbox"/> Certificate IV |
| <input type="checkbox"/> Diploma | <input type="checkbox"/> Advanced diploma |

For diploma and advanced diploma courses, you must be eligible for a vet student loan as we only assist with material and amenity fees.

Are you re-enrolling into this course? Yes No

Location of Course Studies:

- | | |
|---|--|
| <input type="checkbox"/> Bass Coast | <input type="checkbox"/> Berwick |
| <input type="checkbox"/> Chisholm @ 311 Dandenong | <input type="checkbox"/> Cranbourne |
| <input type="checkbox"/> Dandenong | <input type="checkbox"/> Frankston |
| <input type="checkbox"/> Mornington Peninsula | <input type="checkbox"/> Chisholm Online |
| | <input type="checkbox"/> Other |

Course commencement date / /

Course engagement Full time Part time

ABOUT YOU

Please tell us a bit more about you, your present and future goals, and how we can help.

First of all, why did you choose this course?

- | | |
|--|---|
| <input type="checkbox"/> To get into another course of study | <input type="checkbox"/> To get a job |
| <input type="checkbox"/> I wanted extra skills for my job | <input type="checkbox"/> It was a requirement of my job |
| <input type="checkbox"/> To try for a different career | <input type="checkbox"/> To get a better job or promotion |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> To develop my existing business |
| <input type="checkbox"/> For personal interest or self-development | <input type="checkbox"/> Other |
-

What do you know about the industry and employment opportunities that relate to this course?

Where would you like to be in 5 years' time, in your life and career?

Outline your financial situation and any economic barriers impacting your financial hardship.

CHISHOLM REFERRAL

It is highly recommended that you include a referral from a Chisholm staff member to support your application. Applications that do not include a referral will be directed to a careers guidance counsellor for further discussion. Chisholm member of staff to complete this section:

Does this course align with the applicant's career goals (employment or pathway to employment)? Yes No

Do you believe that the applicant has a commitment to complete the course requirements? Yes No

Has this student been placed on a 'stop attendance' notice due to default on debit success payments? Yes No

Is the student disengaging from Chisholm due to the inability to meet ongoing course fees? Yes No

Below is your opportunity to write about the student and how we can help.

Staff name

Email address

Phone number

Signature

Date / /

PERSONAL REFERENCE - SUPPORT AGENCY REFERRAL

You are welcome to include a personal reference related to employment, education or volunteer work; or include a referral from a Support Agency who currently provide State or Federal Government funded support program.

PLEASE NOTE: This excludes job active, disability employment services and other employment programs. You should discuss with your job active provider first about assistance with fees.

Include the reference/referral as a separate document to be attached to this application.

DECLARATION

By submitting your application you are confirming that:

- All of the information provided is true and complete;
- Have read and agreed to the Terms and Conditions;
- Have read and understood the General Privacy Statement;
- Have read and completed the Document Checklist and attached the relevant documentation;
- Agree to participate in an annual survey related to your scholarship application;
- Understand that your application may be shared by Caroline Chisholm Education Foundation with other professional staff at Chisholm Institute.

Name of applicant

Signature

Date / /

If you are under 18 years of age, please ask your parent or guardian to sign this application.

Name of parent or guardian

Address

Suburb

State

Postcode

Phone number

Signature

Date / /

DOCUMENT CHECKLIST

Citizenship Details

Born in Australia

Supplied a colour copy of your Medicare Card? N/A Yes No

Born overseas

Supplied a colour copy of your Australian Passport or Citizenship Certificate? N/A Yes No

Non-Australian Citizens

Supplied evidence of your Permanent Residency or Visa? N/A Yes No

Centrelink details

Supplied a colour copy of your concession/health care card? Yes No

Enrolment details

Supplied a copy of your Statement of fees? Yes No

Supplied a copy of your Textbook/Equipment List? (if applicable) Yes No

Chisholm referral

Have you had a Chisholm employee complete this section? N/A Yes No

Support agency referral

If you have been referred by a government funded support agency, have they provided a referral? N/A Yes No

Ensure you have completed all sections and provided all required documentation as incomplete applications will not be considered.

APPLICATION SUBMISSION

Please send your application and all required documents to the office of the Caroline Chisholm Education Foundation, preferably via email to scholarships@chisholm.edu.au.

Otherwise our physical address is Chisholm Institute Cranbourne campus - Building A and our mailing address is PO Box 684, Dandenong VIC 3175.

Terms and conditions

Scholarship value will be paid to client engagement at the time of your enrolment. Applicants will not receive any monetary payment to the value of the scholarship. Scholarship award is non-transferable.

To be eligible for a scholarship you must meet the criteria as mentioned in the application form and submit all required documentation and have signed the application form.

Selection process

Applicants are required to complete the Scholarship application form and attach their additional supporting documents. The decision of the review panel is final and no further communication will be entered into.

Survey participation

To assist us to maintain existing funding and secure new ongoing funding to provide future students of Chisholm with financial support to complete their studies, we are asking you as a condition of funding to participate in an ongoing study of the benefits to you of completing your qualification of choice.

You may be asked to complete a short questionnaire twice a year and up to three years after you have commenced your qualification.

General privacy statement

The Caroline Chisholm Education Foundation appreciates the importance of protecting personal and any health-related information. The Caroline Chisholm Education Foundation respects an individual's right to privacy and complies with the Commonwealth Privacy Act 1988, Victorian Information Privacy Act 2000 and the Victorian Health Records Act 2001

The Caroline Chisholm Education Foundation will only collect information from you that is necessary in order to provide our services to you. This could include: name, address, date of birth, telephone numbers, emergency contacts and photograph for identification purposes.

The information you provide will only be used/disclosed for the reason you provided it, or for a secondary purpose that you would reasonably expect. The law also allows some uses/disclosures without consent, such as to protect safety.

All personal and/or health information will be removed from the Caroline Chisholm Education Foundation systems when it is no longer required.

The Caroline Chisholm Education Foundation will take reasonable steps to secure the personal and any health-related information it collects, protect it from loss, misuse or alteration, and to ensure it is kept accurate and up-to-date. The Caroline Chisholm Education Foundation will not disclose personal and any health-related information without your consent unless required to by law or regulation.

Individuals can request access to the personal information the Caroline Chisholm Education Foundation holds about them. If individuals believe their personal information is inaccurate, incomplete or out of date the individual is entitled to request that it be corrected. There may be circumstances where access to information cannot be granted as it may compromise the privacy of another individual. All access should be sought through the Freedom of Information Act 1982.

For further information on privacy concerns, contact the CCEF Executive Officer via Phone: **03 9238 8114** or E-mail: scholarships@chisholm.edu.au.

