

IBN Charitable Foundation High School Scholarship



Freecall 1800 014 401

This application form must be completed by the parent / guardian of the child applying for the scholarship.

1 First name

2 Last name

3 Language group (tick one box only)
 Yinhawangka Banyjima Nyiyaparli

4 Postal address

5 Phone
()

6 Email address

7 How do you prefer to be contacted?
 Phone Email Postal address

8 Have you applied to Gumala for scholarship assistance?
No
Yes

9 Is your child eligible for Abstudy?
No
Yes Have you applied for Abstudy yet?
 No
 Yes. Please provide confirmation of this.

10 What is the name of school you are applying to for this scholarship?


11 Please provide details of your child

First name

Last name

Date of birth
 / /

What school year will your child be enrolled in (e.g. year 11)?

12 Please attach the following documents to this application.  **Attachments required**

the student's last two school reports
 the student's birth certificate
 a letter of acceptance from the school the student will be attending

13 I declare that the above details are accurate and true and that this money is to further my child's education. This money will be spent on necessary school expenses. Any money not spent will be returned to the Trust. I understand that funds may not be available if the Trust's budget for the year is spent. I will forward receipts for all expenses to IBN within 2 weeks of receiving them.

Signature
 7

Date
 / /


Office use only

Date received / /

Received by

IBN Corporation Pty Ltd
ACN 093 140 240

CP#

Returning this form 

Post: PO Box 2390 South Hedland WA 6722
Fax: (08) 9172 1136
Email: applications@ibngroup.com.au

In person: 3 Brand Street, South Hedland • 973 Central Road, Tom Price • 7/18 Hedland Place, Karratha.