

APPLICATION FOR WAIVING OF TUITION FEES FOR GOVERNMENT FUNDED PROGRAMS

Student Full Name:

Date of Birth:

Course Name:

Course Start date:

Name of JSA Case Manager if applicable:

Non Concession Tuition Fee:

Concession Tuition Fee:

Resource Fee:

NET Payment:

Please outline the grounds for waiving/ granting concession to the above fees and charges:

I, _____ hereby confirm that the information supplied is true and correct.

Student Signature:

Date:

Office Use only - Approved / not approved

Authorising Officer:

Date:

Remarks:

Supporting Documents (please provide a bank statement for the past three months):