

Application for International Student Emergency Relief Fund

This information is being collected to assess your eligibility for Victorian Government's International Student Emergency Relief Fund. Please send completed application and supporting documents to international@kangan.edu.au

Personal details

Family Name

Given Name

Date of Birth

Email

Phone

Student Number

Tax File Number

Passport Number

Passport Expiry

Country of Birth

Nationality/Citizenship

Current Personal Address

Number and Street

Suburb/Town

State/territory

Country

Postcode

Enrolment Details

Course start date

Course end date

Students must currently be enrolled

CoE number for current course

Are you currently onshore

Yes

No

Students must be studying onshore at your institution

Visa Details

Grant date

Expiry date

Nationality (on passport)

We would like this information for reporting

Hardship Experience

We would like this information for reporting to better understand student needs.

Select the areas in which you are currently experiencing hardship:

Accommodation

Employment

Family Violence

Financial Assistance

Health Care

Mental Health.

Employment and Hardship – This is a key criterion for the fund. Your support officers should sight evidence of hardship through loss of legal employment to be eligible for this fund.

• I was employed in Victoria from March – July 2020

Yes

No

• What is the name of your employer?

• Were you working as an employee, contractor or both?

• I have lost income and am experiencing hardship due to a reduction in hours or a loss of employment Agree/ Disagree

• I don't have enough money, including savings, to meet my basic living costs in the next two weeks Agree/ Disagree

• I do not have immediate access to other forms of financial support Agree/ Disagree

• Please describe the financial hardship you are currently experiencing

Australian Banking Details

BSB

Account

Bank Name

Bank Account Name

Study Melbourne

I would like my institution to share my personal email address with Study Melbourne so that I can receive regular communications from Study Melbourne. Yes No

Personal email address*

*Your institution will be required to report on these fields.

Declaration

I certify that the information provided on this Application form is accurate and complete.

Signature

Name

Date

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