



Kimberley Education Excellence Program Application Form

HOW TO FILL OUT THIS FORM

Please fill out all sections of this form – it can be handwritten or typed. Don't forget to add the attachments requested, read the terms and conditions of the program and sign and date the form when you have finished. You can get your application to Wunan in any of the following ways:

- EMAIL** KEEP Coordinator Kristy Brittain at keep@wunan.org.au
- MAIL** Kimberley Education Excellence Program PO Box 1338 Kununurra WA 6743
- BY HAND** Wunan office, corner Coolibah Drive and Messmate Way Kununurra

WHO CAN APPLY FOR KIMBERLEY EDUCATION EXCELLENCE PROGRAM?

To be eligible for the KEEP Scholarship, students must be Aboriginal residents of the East Kimberley Region. This scholarship is valued up to \$42,000 per year. There will be a \$250.00 upfront cost before your child travels to boarding school, this will cover expenses and will be apart of your Family Contribution.

CHECKLIST BEFORE SENDING YOUR APPLICATION

HAVE YOU:

- Filled out all sections of this application form
- Given details of how you can be easily contacted by Wunan staff
- Enclosed all the required attachments
- Signed and dated the form

OFFICE USE ONLY

Student name _____

Date received ___/___/___ Received by _____ Saved ___/___/___

Location preference _____

Approved Not approved Response sent date ___/___/___

STUDENT DETAILS

Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
First name	
Last name	
Mobile	
Skin name	
Language group	
Home address	
Date of birth	
Postal address	
Name of Mother	
Name of Father	
Who lives in your house?	

PARENT/GUARDIAN DETAILS

Parent / Guardian 1	
First name	
Last name	
Home address	
Postal address	
Email	
Home phone	
Relationship to student	
Relationship status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Living together <input type="checkbox"/> Separated
Are you employed	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual
Place of work	
Parent / Guardian 2	
First name	
Last name	
Home address	
Postal address	
Email	
Home phone	
Relationship to student	
Relationship status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Living together <input type="checkbox"/> Separated
Are you employed	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual
Place of work	

STUDENT EDUCATION DETAILS

School currently attending _____

Student current year level _____ School phone number _____

Finish each of the following statements as accurately as you can. The statement needs to best describe your child as a student

My child's attitude towards school is	
My child feels they do well at the following subjects	
My child feels they struggle with the following subjects	
My child's attendance at school is	<input type="checkbox"/> Excellence <input type="checkbox"/> Average <input type="checkbox"/> Poor
My child's school results are	<input type="checkbox"/> Excellence <input type="checkbox"/> Average <input type="checkbox"/> Poor
I / We help our child at school by	
I am / We are keen for our child to be part of this program because	
I / We have spoken to our child about studying away from home and he/she is feeling	
How did you hear about this scholarship?	<input type="checkbox"/> Family Member <input type="checkbox"/> Media (Newspaper, Radio) <input type="checkbox"/> Someone in KEEP <input type="checkbox"/> Internet <input type="checkbox"/> School or Teacher <input type="checkbox"/> Community Member <input type="checkbox"/> other? If so where
Have you applied for any other scholarships If so please give details	

This application will not be processed without the below documents

Please attach the following documents with this form:

- A copy of your child's latest and previous year school report
- A statement from the school on your child's attendance rate
- Provide two written references from people who can act as a referee for your child
- Copy of your child's NAPLAN results

STUDENT DECLARATION

To be completed and signed by the student

I, _____
c to join the Kimberley Education Excellence Program in 2016. I have talked about this program with my parents/guardians and/or teachers and understand what it is about. I have also read and understood the terms and conditions of the program, and if accepted, agree to abide by these conditions.

Student's signature: _____ **Date:** _____

TERMS, CONDITIONS and PERMISSIONS

Parent Declaration

I / We wish to apply to be part of the Kimberley Education Excellence Program for our son / daughter. Child's name in full _____

I / We give my / our permission for authorised staff of Wunan to consult with the following; High School staff and Principal, Centrelink for salary verification, the written referee/s you have that have identified on this application form.

I / We understand that KEEP is a partnership between families, Wunan, partner school and sponsors, all of whom make a contribution to the student's education.

I / We am / are prepared to make a financial contribution each year to Wunan to support my child.

The costs of this program will depend on household income as per the schedule:

Household salary per year	Cost per year
\$0 - \$50,000	\$2,000
\$51,000 - \$80,000	\$3,000
\$81,000 - \$120,000	\$3,500
\$120,000+	\$4,500

I / We understand and accept that the completion of this application form does not guarantee an interview or entry into the program.

I / We have read and understood the terms and conditions of the program, and if my / our child is accepted, I / We are willing to agree and abide by these terms and conditions as outlined in the KEEP handbook.

Parent/Guardian 1 signature _____ **Date** _____

Parent/Guardian 2 signature _____ **Date** _____

CONFIRMATION OF COMMUNITY RESIDENCE

To be completed by Parent/Guardian

I/We, _____
First name/other name/surname

now living at _____
Full residential address

declare that my/our son /daughter is of Aboriginal and/or Torres Strait Islander descent, and is a resident of the East Kimberley.

Signature _____ Date _____

Below is to be completed by an incorporated Aboriginal organisation or association within the applicant's community

The above person is accepted and recognised as a member of the community by the Board of Management of this incorporated Aboriginal organisation or association.

Name of organisation _____

Address of organisation _____

Name of person making this declaration _____

Position of the person making this declaration _____

Signature _____ Date ____/____/____

***These signatories must not be members of the applicant's family**