

THINGS YOU NEED TO KNOW

Thank you for your interest in the Kimberley Education Excellence Program. Before you begin filling out an application for our Kimberley Excellence Education Program (KEEP) here are a few important things that we thought you should know.

Scholarships

The Wunan Kimberley Excellence Education Program (KEEP) provides scholarships for approximately 58 Aboriginal students from the Kimberley region of Western Australia. Wunan believes a good home, together with real work and a proper education for children are the key ingredients for Aboriginal people and families in our region to re-establish control over their lives and enjoy making real choices.

Family Group Home Program

Our Family Group Homes are located in Sydney, and Perth. We take great care in recruiting Aboriginal House Parents to manage these homes. House Parents are experienced in working with Aboriginal people and usually come from the Kimberly region of WA. Therefore they are well connected to the Communities from where the students come from and are better able to support their cultural needs.

Schools

Wunan have partnered with a number of quality schools to reserve places for our Scholarship recipients. When an individual applies for our program, they are applying for the KEEP Scholarship – not the location or the school. The location and the school that they are offered a place for is determined by Wunan in accordance with an assessment and suitability process.

Outside of the Schools

Our Family Group Homes aim to operate just like an ordinary home except that there are usually a larger number of children (up to 12). Students participate in house chores and meal preparation and are encouraged to develop skills that will prepare them for life after school and independent living. As students settle in to the home they learn to adjust to the move and living harmoniously with their new 'family'. Our focus is on their supporting their education, culture and social emotional well-being.

Family Support

It is a requirement for our program for parents to be engaged in their child's education throughout the duration of the Scholarship. Engagement occurs in many ways, including regular contact with the House Parent, and maintain regular contact with their Daughter during the school term.

ELIGIBILITY FOR A KEEP SCHOLARSHIP

To be eligible for a KEEP Scholarship you need to:

- ✓ Be a student in Years 7, 8 or 9
- ✓ Be committed to completing Year 12
- ✓ Have good school attendance
- ✓ Have financial and family support

If this sounds like the right program for you - please proceed with completing the Application Form in full and returning ALL required documentation.

| SECTION A | | | | |
|---------------------------------|-------------------------------------|---|-------------------------------|---|
| STUDENT INFORMATION | | | | |
| First Name | | Last Name | | |
| Preferred Name | | | | |
| Gender | Male <input type="checkbox"/> | Female <input type="checkbox"/> | Date of Birth | Birth Certificate attached? YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Do you recognise as | Aboriginal <input type="checkbox"/> | Torres Strait Islander <input type="checkbox"/> | Both <input type="checkbox"/> | |
| Language group | | Skin name | | |
| Home Address: | | | | |
| Dry season address | | Wet season address | | |
| Place of birth | | Country of birth | | |
| Birth Mum: | | Birth Dad: | | |
| Language/s spoken at home: | | | | |
| Student Mobile | | Community Clinic | | |
| Medicare Number | | Health Care Card | | |
| Child's # on card | | Expiry: | | |
| Customer Reference Number (CRN) | | TFN | | |

| CARE, PROTECTION & CRIMINAL HISTORY | |
|--|--|
| Child lives with: | |
| Is this student in the Care of the CEO? (Child Protection & Family Services) | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| <i>Please provide details</i> | |
| Type of Order: | Case Manager: |
| Is there a court order or parenting plan relating to this student? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| <i>Please provide details and attach copy of order or plan</i> | |
| Has this student ever been involved with the court system or police? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| <i>Please provide details and attach copy of relevant papers</i> | |

| EDUCATIONAL INFORMATION | |
|--|--|
| Current School | Current Year Level |
| Have you applied for any other scholarships? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| <i>Please provide details</i> | |
| Does your child have any special needs or additional supports within school? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| <i>Please provide details</i> | |

HEALTH & MEDICAL

Please tick if the student has any of the following existing health conditions:

| | | |
|---|--|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Allergies(eg; Penicillin, sunscreen, nuts) |
| <input type="checkbox"/> Hearing impairment | <input type="checkbox"/> Physical disability | <input type="checkbox"/> Seizures |
| <input type="checkbox"/> Visual impairment, Intellectual/Learning impairment (Dyslexia) | <input type="checkbox"/> Acquired brain impairment | <input type="checkbox"/> Mental health or Behaviour issues (eg; Depression, ADHD) |
| <input type="checkbox"/> EpiPen – <i>anaphylaxis management plan required</i> | <input type="checkbox"/> Sensitivity to drugs | <input type="checkbox"/> Headaches/Migraines |
| <input type="checkbox"/> Rheumatic heart disease | <input type="checkbox"/> Heart murmurs | <input type="checkbox"/> Chest pains |

*If you have ticked ANY OF THE ABOVE boxes, please supply further information.***PARENT / GUARDIAN INFORMATION 1**

1

| | | | |
|---|---|---------------------|--|
| Relationship to student | | | |
| First Name | | Last Name | |
| Preferred Name | | | |
| Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> | Date of Birth | |
| Do you recognise as Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both <input type="checkbox"/> | | | |
| Language group | | Skin name | |
| Home Address: | | | |
| Dry season address | | Wet season address | |
| Postal Address: | | Nearest Post Office | |
| Place of birth | | Country of birth | |
| Language/s spoken at home: | | | |
| Mobile Number | | Phone Number | |
| Email | | Are you employed? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Employer | | Employment status | F/T P/T CASUAL |
| Marital Status | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Defacto | | |

PARENT / GUARDIAN INFORMATION 2

2

| | | | |
|---|---|---------------------|--|
| Relationship to student | | | |
| First Name | | Last Name | |
| Preferred Name | | | |
| Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> | Date of Birth | |
| Do you recognise as Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both <input type="checkbox"/> | | | |
| Language group | | Skin name | |
| Home Address: | | | |
| Dry season address | | Wet season address | |
| Postal Address: | | Nearest Post Office | |
| Place of birth | | Country of birth | |
| Language/s spoken at home: | | | |
| Mobile Number | | Phone Number | |
| Email | | Are you employed? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Employer | | Employment status | F/T P/T CASUAL |
| Marital Status | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Defacto | | |

SECTION B

STUDENT

THIS SECTION MUST BE FILLED OUT BY THE STUDENT IN THEIR OWN HANDWRITING

My thoughts and feelings about school are:

I am most happy when:

Things that upset me the most:

My favorite subjects at school are:

The subjects I struggle with at school are

I want to be a part of the KEEP Scholarship Program because

3 goals that I want to achieve in the next year are:

1.

2.

3.

SECTION C

PARENT

THIS SECTION MUST BE FILLED OUT BY THE PARENT IN THEIR OWN HANDWRITING

I want my child to be a part of the KEEP Scholarship program because

I am involved in my child's education now in the following ways:

If my child was away on a KEEP Scholarship I would support them by:

Education is important to me because:

If my child is unsuccessful for a KEEP Scholarship my plan for their education is:

SECTION D(i) VERIFICATION OF ABORIGINALITY

THIS SECTION MUST BE SIGNED BY THE PARENT

I confirm that my child is of Aboriginal decent:

| | | | |
|-----------------|--|---------------|--|
| Parent Name (1) | | ParentName(2) | |
| Signature: | | Signature: | |

SECTION D(ii) VERIFICATION OF ABORIGINALITY

THIS SECTION MUST BE COMPLETED BY A COMMUNITY ORGANISATION

Complete the following OR attach a confirmation of Aboriginal and/or Torres Strait Islander heritage certificate from a Community Organisation.

| | |
|------------------------------|--|
| Community Name: | |
| Community Organisation Name: | |
| Community Organisation ABN: | |
| Telephone: | |
| Address: | |
| Contact Name: | |

The abovementioned Community Organisation understands that the applicant is seeking application for the KEEP Scholarship program for their child in a position for which Aboriginal and/or Torres Strait Islander heritage is considered essential. The applicant has requested the abovementioned Community Organisation confirms their Aboriginal and/or Torres Strait Islander heritage.

Tick relevant box/es that apply

The Community Organisation verifies that the applicant:

- Is recognised and accepted by the above-mentioned Community as an Aboriginal and/or Torres Strait Islander person; and/or
- Has provided evidence to verify their Aboriginal and/or Torres Strait Islander heritage

Date of meeting: _____ / _____ / _____

Meeting resolution number: _____



.....
(Print name of authorised person)

.....
(Signature of authorised person)

IMPORTANT - CHECKLIST

Please ensure that you have completed ALL parts of this application before returning. To help you ensure that your application is complete you should have completed the following:

- Section A – Student Information, Education
- Section B - Student
- Section C – Parent
- Section D – Verification of Aboriginality

Also Included with this application are the following documents:

- A copy of my child's latest and previous school year report
- A statement from the school confirming my child's attendance rate
- Two written references (one from the school) from people who knows your child well
- Copy of ALL of your child's NAPLAN results
- Copy of any Family Court or Protection Orders
- Copy of any Criminal history
- Copy of any Medical Plan or history
- Copy of any support service referrals *ie Occupational Therapy, Hearing Specialist etc*

This Application can be returned via the following methods:

In person: Wunan Foundation, 76 Coolibah Drive Kununurra

Mail: Wunan Foundation Att: KEEP, PO Box 1338, KUNUNURRA WA 6743

Email: keep.wunan@wunan.org.au

OFFICE USE ONLY

| | | | |
|---------------------------|--|-------------------|--|
| Student Name: | | | |
| Date Received | | Received by: | |
| Date entered into system: | | Entered by: | |
| Current Year level | | Entry Year level | |
| Approved | YES <input type="checkbox"/> NO <input type="checkbox"/> | Applicant advised | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| | | Date: | |

OVERVIEW OF THE KEEP SCHOLARSHIP

The **KEEP scholarship** supports young East Kimberley Aboriginal people to receive a high quality education. Wunan acknowledges that families in the region can experience disadvantage and **financial barriers**. **KEEP scholarships have a high value and cover an extensive range of items for the student's education and living expenses while away from home.**

ABSTUDY

Parent/Guardian needs to apply for ABSTUDY as soon as possible after a student has been accepted into KEEP. ABSTUDY can provide assistance with school tuition fees, boarding cost and travel. Parents are responsible for communicating with Centrelink directly and registering their child for ABSTUDY. Students cannot start schooling away until ABSTUDY has been approved.

ABSTUDY Provide funding

- | |
|---|
| <ul style="list-style-type: none"> • Travel (flights to and from the boarding house) • Tuition (school fees up to a certain amount) • Boarding costs <ul style="list-style-type: none"> ➤ Rent ➤ Food ➤ Consumables ➤ Maintenance |
|---|

Boarding costs not fully covered by ABSTUDY

| | | |
|---------------------------------------|--|--|
| Parent/Guardian Responsibility | <ul style="list-style-type: none"> • School Uniform • Toiletries • Clothing • School shoes • Sport Shoes (joggers) • Haircuts • Pocket money • Student opal/smart riders | <ul style="list-style-type: none"> • School laptops and iPads • School photos • Sporting registration fees • School camps and day trips • Mobile phone and credit |
|---------------------------------------|--|--|

