

FINANCIAL ASSISTANCE APPLICATION FORM

To be completed by parents or guardian



Does the March of the Living applicant have a part-time job?

☐ Yes ☐ No

If yes, where:

Hours:

I hereby declare that my son/daughter will exert every effort to find a job as soon as possible so that he/she can show their commitment to the program and to help fund their participation.

Number of dependents living at home:

Does the MOTL applicant attend a

☐ Private or ☐ Public school

Name of School:

Are you a recipient of a subsidy/fee relief from your child's school?

☐ Yes ☐ No

If so, please indicate percentage of the subsidy: { % }

Are you a recipient of government benefits?

☐ Yes ☐ No

If yes, please indicate which:

☐ Newstart allowance

☐ Parenting payment

☐ Carer allowance

☐ Disability support pension

☐ Youth allowance

☐ Sickness allowance

☐ Other:



What is your reason for requesting financial assistance?

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Cost of March of the Living Program: Refer to Website

Amount of financial assistance being applied for: { \$ }

N.B. Maximum subsidy is \$AUD4000

Please be advised that we receive many requests for financial assistance and we are not always able to assist everyone due to limited available funding. This is an application only. MOTL Australia is not obligated to meet the request of this application.

I hereby give permission for March of the Living Australia to communicate with my child's school in order to determine potential financial assistance arrangements.

Parent signature: _____

*Additional financial information and proof of benefits may be requested prior to consideration of this application.

All applications for financial assistance will be treated in the strictest confidence and any financial assistance will be granted at the sole discretion of the March of the Living Committee,

Further correspondence will not be entered into.