

REMISSION REQUEST FORM



**OUR LADY OF
GRACE SCHOOL**

Requests for remission should first apply for school card to access a 40% discount, if unsuccessful and still in need of assistance please complete this form and return it to the Finance Manager or email finance@OLOG.catholic.edu.au

ENROLLING PARENTS / CAREGIVERS

PARENT/GUARDIAN 1

Surname Given Name

PARENT/GUARDIAN 2

Surname Given Name

CHILDREN ENROLLED AT OUR LADY OF GRACE SCHOOL

CHILD 1

Surname Given Name Year Level Enrolling Year 20

CHILD 2

Surname Given Name Year Level Enrolling Year 20

CHILD 3

Surname Given Name Year Level Enrolling Year 20

I/We being the enrolling Parents/Caregivers as per the enrolment document signed when enrolling, would like to be assessed for Remission.

If your income was less than \$60,867 per annum, please apply for School Card. If successful 40% discount will be granted off fees net of sibling discount.

(Please note that we require proof of income from **both** enrolling parents/caregivers. If this involves a split family situation, then the information can be forwarded to this office separately)

A copy of our most recent Taxation Assessment is attached as confirmation of our earnings.

If your circumstances have changed significantly please submit a copy of your most recent 3 pay slips.

PARENT/GUARDIAN 1

Surname Given Name

Signature Date

PARENT/GUARDIAN 2

Surname Given Name

Signature Date

OFFICE USE ONLY

Family ID Total Tuition Fee \$

Discount Applied \$

Approved Date