



HCC Tuition Fee Discount Scheme Application Form

Parent/Legal Guardian Details (Please complete in full - no abbreviations)

Surname _____ First Name _____

Centrelink Concession Card Details

- Family Health Care Card (Family Card only not Child's Card)
- Pensioner Concession Card

Card No (CRN) _____ Date of Expiry (in full) _____

Details of Students Attending this School

Surname	First Name	Year

Parent/Guardian Declaration

I DECLARE THAT

- The card is in the name of the person responsible for fee payment.
- I have **NOT CLAIMED** nor do I intend to claim Aboriginal Secondary Grants Scheme - ABSTUDY.
- The above students are **NOT** in receipt of any Bursary/Scholarship **MORE THAN \$1,000**.
- I will notify the school if my concession card status changes during the year.

Parent/Guardian's Signature

School Officer Must Sight and Copy the Claimant's Card

I have sighted and copied the claimant's card and confirm the details are correct.

Name of Staff Member

Position Held

Officer Signature

Date