

Purpose of this form

This form is for dependent secondary boarding school students from remote communities. It can also be used for dependent students from remote communities who need to board away from home to repeat their final year of primary school before starting secondary schooling.

Filling in this form

- Please use black or blue pen.
- Print in BLOCK LETTERS.
- Mark boxes like this with a ✓ or ✗.
- Where you see a box like this **Go to 5** skip to the question number shown. You do not need to answer the questions in between.

Returning your form

Check that all required questions are answered and that the form is signed and dated. Return this form and all additional documents to one of our service centres or online by **31 December** of the study year. You can also register an intent to claim ABSTUDY. For more information, see *Lodgement dates* on page 1 of the **Notes Booklet**.

You can return this form and any supporting documents:

- online – submit your documents online (excluding identity documents). For more information about how to access an Online Account or how to lodge documents online, go to humanservices.gov.au/submitdocumentsonline
- by post – return your documents by sending them to:
**Department of Human Services
Student Services
Reply Paid 7804
Canberra ACT 2610**
- in person – if you are unable to submit this form and any supporting documents online or by post, you can provide them in person to one of our service centres.

Office use only	
Centrelink Reference Number—Applicant	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> Date stamps
Centrelink Reference Number—Student	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>
Date received by community agent, institution, etc.	<input type="text"/> / <input type="text"/> / <input type="text"/>
Date accepted	<input type="text"/> / <input type="text"/> / <input type="text"/>
Date received in processing office	<input type="text"/> / <input type="text"/> / <input type="text"/>
Logon ID	<input type="text"/>
Assessor's signature	<input type="text"/>
Logon ID	<input type="text"/>
Date	<input type="text"/> / <input type="text"/> / <input type="text"/>

Student details

Give the ABSTUDY student's details in questions 1 to 8.

- 1 Is the student of Aboriginal or Torres Strait Islander Australian origin, that is:
- the student is of Aboriginal or Torres Strait Islander Australian descent, **and**
 - the student identifies as an Aboriginal or Torres Strait Islander Australian, **and**
 - the student is accepted as such by the community in which they live or have lived?

If the student is of both Aboriginal and Torres Strait Islander Australian origin, please tick both 'Yes' boxes.

No  You are not eligible for ABSTUDY, call us on **1800 132 317**.

Yes – Aboriginal *Go to next question*
Yes – Torres Strait Islander *Go to next question*

2 The student's name

Mr Mrs Miss Ms Other

Family name

First given name

Second given name

- 3 Has the student ever used or been known by any other name (e.g. maiden name, previous married name, skin/clan/tribal name, name at birth, alias, adoptive name, foster name)?
- No *Go to next question*
Yes *Give details below*

1 Other name

Type of name (e.g. name at birth)

2 Other name

Type of name (e.g. Aboriginal/Islander name)

If the student has more than 2 other names, attach a separate sheet with details.


- 4 The student's gender

Male

Female

- 5 The student's date of birth

/ /

 If the student is 15 years of age or younger during the year of study and is living at home, a parent/guardian/carer should complete a **Claim for ABSTUDY Schooling A** form (SY018). If you do not have this form, go to humanservices.gov.au/forms or call us on **1800 132 317**.

- 6 The student's permanent address

If the student lives away from home to study, write the address where they live when not studying.

Postcode

- 7 The student's postal address (if different to above)

WILTJA RESIDENTIAL PROGRAM
111-125 FOLLAND AVENUE
LIGHTSVIEW, SA Postcode 5085


- 8 The student's Centrelink Reference Number (if known)

- - -

- 9 Do you want another person or organisation to enquire or act on your behalf when dealing with us?

No *Go to next question*

Yes

 You will need to complete and attach an **Authorising a person or organisation to enquire or act on your behalf** form (SS313). If you do not have this form or want more information about nominee arrangements, go to humanservices.gov.au/nominees



CLK0SY092 1701

School details

Give the ABSTUDY student's school details in questions 10 to 12.

10 What grade will the student be in during the school year (e.g. Year 9)?

11 What school will the student be going to in the school year?

WILTJA SECONDARY COLLEGE

12 What date will the student start school in the school year?

Note: If the student does not start on the first day of school, it may affect your ABSTUDY payments.

Away from home details

Give the ABSTUDY student's away from home details in questions 13 to 25.

13 Will the student be living away from home to study in the school year?

No Call us on 1800 132 317 for details.

Yes Go to next question

14 Please read this before answering the following question.

You must attach a statement, document or letter as requested in the note following the box ticked.

Your payments cannot start until all information has been provided.

Indicate below why the student will live away from home

Tick **ONE** box beside the statement that best describes why the student will be living away from home.

He or she must travel for at least 90 minutes (one way) from home to the nearest state school he or she is able to enrol in.

Give the time spent travelling each way

Please read *Travelling Distance rules* in the **Notes Booklet** before answering this question.


He or she meets the travelling distance rule

Which travelling distance rule is met?


Rule 1

Rule 2

The student's access from home to the nearest state schools is often disrupted

 Provide a statement from the local Council describing road conditions and the number of times access was not possible during the previous school/academic year.

His or her home conditions make study difficult

 Provide a written statement by yourself and at least one supporting statement from an independent authority with first-hand knowledge of your circumstances.


Appropriate schooling cannot be provided at his or her local state schools

Give the name of the school(s) the student previously attended.


Continued

14 Continued


He or she has a disability and cannot attend his or her local state schools

 Provide a medical certificate stating the disability and reason why the local state school cannot be attended (this is not required if an assessment was a requirement of acceptance into a special education institution). Alternatively, you may be eligible for Assistance for Isolated Children (AIC).


He or she is studying an approved special course that is not available at his or her local state schools

 Provide a statement from the school confirming the special course enrolment.


His or her family moves often because of work

 Provide a statement of your family's recent and expected moves for work.


He or she has been excluded from attending his or her local state school

 Provide a letter from education authority confirming this.

He or she has been subjected to serious and continuing racial discrimination at his or her local state schools

 Provide a written statement from yourself or another parent/guardian or carer and at least one supporting statement from the school, Indigenous Education Consultative Board (IECB), or their nominee explaining the situation. In the absence of an IECB, an independent representative from the local Indigenous community with an education background should be involved.

He or she has been awarded an approved independent school scholarship

 Provide a letter from the school confirming the scholarship and evidence of the involvement of the Indigenous Education Consultative Board (IECB) or their nominee.

He or she is a school student and applying for continuity of study provisions

Call us on **1800 132 317** for details.

15 Please read this before answering the following questions.

Note: If the student requires assistance with travel and is boarding at a school or hostel, please contact your school to arrange travel with us once your claim has been granted. If boarding privately, contact us on **1800 132 317** to lodge a travel request.

Where will the student live while they are studying?

Hostel **Go to next question**

Boarding school **Go to 26**

Boarding privately **Go to 17**

16 What is the name of the hostel where the student will be boarding?

WILTJA RESIDENTIAL PROGRAM

Go to 26

17 Give details of the person providing board.

Mr Mrs Miss Ms Other

Family name

First given name

Second given name

18 What is the address where the student will be boarding?

WILTJA RESIDENTIAL PROGRAM
111-125 FOLLAND AVENUE
LIGHTSVIEW, SA Postcode 5085

19 What is the phone number where the student will be boarding?

(08) 8359 4620

20 Please read this before answering the following questions.

Board means that meals are included in your rent.
Lodgings is the part of your rent that does not include meals.
Note: to be eligible for Rent Assistance, a rent certificate will need to be provided to confirm the amount of board/lodgings being paid. A rent certificate can be issued by contacting ABSTUDY on **1800 132 317**.

Is the private board provider charging any money for Board and/or Lodgings?

No **Go to 26**

Yes **Go to next question**

21 Can you separate the amounts that you pay for board and/or lodgings?

No Total board and lodgings charged per day, week, fortnight, 4 weeks or calendar month
\$ _____ per _____

Yes Amount paid for board (meals) per day, week, fortnight, 4 weeks or calendar month
\$ _____ per _____

Amount paid for lodgings (accommodation only) per day, week, fortnight, 4 weeks or calendar month
\$ _____ per _____

22 Do you want us to pay your board and/or lodgings direct to the private board provider?

No Go to 26

Yes Go to next question

23 Do you want to pay any other money direct to the private board provider?

No Go to next question

Yes Give details below

\$ _____ per fortnight

24 Private Board Bank Account details

Check with the person providing board that the account and branch numbers you provide are correct. Payments will be delayed if the account number is wrong. It is up to you to give the right number.

If you are directing your ABSTUDY payments to a boarding school or hostel, you do not need to provide their account details as we will obtain this information direct from the school or hostel.

Please provide account details

Name of bank, building society or credit union _____

Branch where the account is held _____

Branch number (BSB) _____

Account number (this may not be the card number) _____

Account held in the name(s) of _____

25 What date do you want to commence the payments to the private board provider?

____ / ____ / ____

Health Care Card

Give the ABSTUDY student's details for a Health Care Card in questions 26 to 28.

26 Please read this before answering the following question.

Children under the age of 16 years should generally be covered by their parents' Health Care Card through entitlement to Family Tax Benefit.

For more information about the Health Care Card, you can obtain a copy of A Guide to Concession Cards from humanservices.gov.au/healthcarecard or call us on 1800 132 317.

Will the student require a Health Care Card?

Full-time students 16 years of age or over receiving ABSTUDY are not **automatically** entitled to a Health Care Card, but may qualify for a Low Income Health Care Card.

You may wish to consider the 'Yes' option.

No Go to 29

Yes We will assess your eligibility for a Health Care Card once you have been receiving ABSTUDY for 8 weeks. If your situation changes and you need a Health Care Card sooner, you are still able to lodge a claim at that time.

▶ Go to next question

27 Will the student have an **immediate** need for a Health Care Card?

No Go to 29


Yes Go to next question

28 Did the student earn any income from employment during the past 8 weeks?

Include:

- income from work
- payments from government departments other than us
- income from boarders or lodgers who live with you
- income from self-employment
- income from annuities
- regular gifts
- foreign income.

No Go to next question

Yes  You will need to provide copies of documents which show income for the past 8 weeks (e.g. payslips for the past 8 weeks or a letter from the employer stating gross wages for the past 8 weeks).

Note: Letters and payslips must have the employer's name and address on them.

▶ Go to next question

29 Please read this before answering the following questions.

Questions 30 to 54 are to be completed by the student's parent(s)/guardian(s).
If you would prefer to provide these details on a separate form, call us on **1800 132 317**.
Your payments cannot start until all of these questions have been answered.

Parent/Guardian

30 Please read this before answering the following question.

We recognise both opposite-sex and same-sex relationships.
This includes de facto relationships and relationships registered under state or territory law.
Select **ONE** option below that best describes your current relationship status.

What is your **CURRENT** relationship status?

Married **Go to 31**

Registered relationship **Go to 31**
(opposite-sex or same-sex relationship registered under state or territory law)

Partnered **Go to 32**
(living together in an opposite-sex or same-sex relationship, including de facto)

Separated **Go to 33**
(previously lived with an opposite-sex or same-sex partner, including in a marriage, registered or de facto relationship)

Divorced **Go to 33**

Widowed **Go to 34**
(previously partnered with an opposite-sex or same-sex partner, including in a marriage, registered or de facto relationship)

Never married or lived with a partner **Go to 35**

31 What is your date of marriage or relationship registration?

/ / **Go to 35**

32 When did you and your partner start living together as a member of a couple?

/ / **Go to 35**

33 When did you and your partner separate or divorce?

/ / **Go to 35**

34 Give the following details about your deceased partner

Date of death

/ / **Go to next question**

Parent/Guardian

35 Your name

Mr Mrs Miss Ms Other

Family name

First given name

Second given name

36 Your date of birth

/ /

37 Your permanent address

Postcode

38 What is your relationship to the ABSTUDY student named at question 2?

Mother

Father

Other Give details below

39 Did the ABSTUDY student come into your care after 1 January in the year of study?

No Go to next question

Yes Give date

/ /

Parent/Guardian Partner

Only provide the information below if the parent/guardian has a partner during the student's year of study.

35 Your name

Mr Mrs Miss Ms Other

Family name

First given name

Second given name

36 Your date of birth

/ /

37 Your permanent address

Postcode

38 What is your relationship to the ABSTUDY student named at question 2?

Mother

Father

Other Give details below

39 Did the ABSTUDY student come into your care after 1 January in the year of study?

No Go to next question


Yes Give date

/ /

Parent/Guardian

- 40 Do you or will you receive:
- a pension, benefit or allowance (including Farm Household Allowance) from us (not Family Tax Benefit), a service or war/defence widow pension from the Department of Veterans' Affairs
 - some other Australian Government income support payment, or
 - ABSTUDY Living Allowance or Austudy?

No

 You will also need to complete and attach a **Parent(s)/Guardian(s) details for the BASE tax year and CURRENT tax year for dependent Youth Allowance or ABSTUDY customers** form (Mod JY)
If you do not have this form, go to humanservices.gov.au/forms or call us on **1800 132 317**
▶ *Go to next question*

Yes Give details below

Name of payment

Your Centrelink Reference Number (if known)

 - - -

Date payment started (if after 1 January)

 / /

41 Please read this before answering the following question.

For more information about voluntary maintenance arrangements, refer to *Maintenance you receive* in the **Notes Booklet**.

Do you receive financial support from a voluntary maintenance arrangement for the ABSTUDY customer named at question 2?

No *Go to 43*

Yes *Go to next question*

42 What is the amount of maintenance you receive for this child per day, week, fortnight, month or calendar year?

 \$ per


Date this started

 / /

Parent/Guardian Partner

- 40 Do you or will you receive:
- a pension, benefit or allowance (including Farm Household Allowance) from us (not Family Tax Benefit), a service or war/defence widow pension from the Department of Veterans' Affairs
 - some other Australian Government income support payment, or
 - ABSTUDY Living Allowance or Austudy?

No

 You will also need to complete and attach a **Parent(s)/Guardian(s) details for the BASE tax year and CURRENT tax year for dependent Youth Allowance or ABSTUDY customers** form (Mod JY)
If you do not have this form, go to humanservices.gov.au/forms or call us on **1800 132 317**
▶ *Go to next question*

Yes Give details below

Name of payment

Your Centrelink Reference Number (if known)

 - - -

Date payment started (if after 1 January)

 / /

41 Please read this before answering the following question.

For more information about voluntary maintenance arrangements, refer to *Maintenance you receive* in the **Notes Booklet**.

Do you receive financial support from a voluntary maintenance arrangement for the ABSTUDY customer named at question 2?

No *Go to 43*

Yes *Go to next question*

42 What is the amount of maintenance you receive for this child per day, week, fortnight, month or calendar year?

 \$ per

Date this started

 / /

43 Please read this before answering the following question.

Include the child in your or your partner's care if:

- one of the following payments is being paid, or will be claimed, as a dependent (i.e. their payment is also subject to the Parental Means Test):
 - Youth Allowance (YA)
 - ABSTUDY Living Allowance or School Fees Allowance, **or**
- Assistance for Isolated Children (AIC) Additional Boarding Allowance, **or**
- they meet the definition of a Family Tax Benefit (FTB) child (i.e. they are aged 0–19 years old, and, if aged 16–19, in secondary school). If there is a shared care arrangement in place for the child, this may also be taken into account.

Do NOT include:

- the customer named in question 2 of this form, **or**
- if the child does not meet one of the criteria of a dependent child.

For more information, please refer to *Other dependent children*, in the **Notes Booklet**.

Are there any **other dependent children** in your family?

No **Go to 51 on page 12**

Yes **Go to next question**

Child 1

44 Dependent child's details

Family name

First given name

Date of birth

45 Receiving, eligible for, or recently claimed one of these payments:

YA / ABSTUDY / AIC **Go to 50**

Family Tax Benefit, as fortnightly payments **Go to 50**

None of these payments, or claiming Family Tax Benefit as a lump sum **Go to next question**

46 Do you (and/or your partner) share the care of this child with another person?

Do not include school/day care arrangements.

No **Go to 50**

Yes **Go to next question**

47 Please read this before answering the following question.

If you do not know what percentage of care you have, or if the information does not match our records, a shared care assessment may be required before we are able to include them in the calculation of the ABSTUDY customer's payment.

What is the percentage of your (and/or your partner's) care of this child?

 %

48 Do you (and/or your partner) receive financial support from a voluntary maintenance arrangement for this child?

No **Go to 50**

Yes **Go to next question**

49 What is the amount of maintenance you (and/or your partner) receive for this child per day, week, fortnight, month or calendar year?

\$ per

Date this started

50 Do you have another dependent child?

No **Go to 51 on page 12**

Yes **Go to next question, on the next column**

Child 2**44** Dependent child's details

Family name

First given name

Date of birth

45 Receiving, eligible for, or recently claimed one of these payments:YA / ABSTUDY / AIC **Go to 50**Family Tax Benefit, as fortnightly payments **Go to 50**None of these payments, or claiming Family Tax Benefit as a lump sum **Go to next question****46** Do you (and/or your partner) share the care of this child with another person? **Do not include** school/day care arrangements.No **Go to 50**Yes **Go to next question****47** Please read this before answering the following question.

If you do not know what percentage of care you have, or if the information does not match our records, a shared care assessment may be required before we are able to include them in the calculation of the ABSTUDY customer's payment.

What is the percentage of your (and/or your partner's) care of this child?

 %**48** Do you (and/or your partner) receive financial support from a voluntary maintenance arrangement for this child?No **Go to 50**Yes **Go to next question****49** What is the amount of maintenance you (and/or your partner) receive for this child per day, week, fortnight, month or calendar year? per

Date this started

50 Do you have another dependent child?No **Go to 51 on page 12**Yes **Go to next question, on the next column****Child 3****44** Dependent child's details

Family name

First given name

Date of birth

45 Receiving, eligible for, or recently claimed one of these payments:YA / ABSTUDY / AIC **Go to 50**Family Tax Benefit, as fortnightly payments **Go to 50**None of these payments, or claiming Family Tax Benefit as a lump sum **Go to next question****46** Do you (and/or your partner) share the care of this child with another person? **Do not include** school/day care arrangements.No **Go to 50**Yes **Go to next question****47** Please read this before answering the following question.

If you do not know what percentage of care you have, or if the information does not match our records, a shared care assessment may be required before we are able to include them in the calculation of the ABSTUDY customer's payment.

What is the percentage of your (and/or your partner's) care of this child?

 %**48** Do you (and/or your partner) receive financial support from a voluntary maintenance arrangement for this child?No **Go to 50**Yes **Go to next question****49** What is the amount of maintenance you (and/or your partner) receive for this child per day, week, fortnight, month or calendar year? per

Date this started

50 Do you have another dependent child?No **Go to 51 on page 12**Yes **Go to next question, on the next column**

Child 4

44 Dependent child's details

Family name

First given name

Date of birth

 /

45 Receiving, eligible for, or recently claimed one of these payments:

YA / ABSTUDY / AIC **Go to 50**

Family Tax Benefit, as fortnightly payments **Go to 50**

None of these payments, or claiming Family Tax Benefit as a lump sum **Go to next question**

46 Do you (and/or your partner) share the care of this child with another person?

Do not include school/day care arrangements.

No **Go to 50**

Yes **Go to next question**

47 Please read this before answering the following question.

If you do not know what percentage of care you have, or if the information does not match our records, a shared care assessment may be required before we are able to include them in the calculation of the ABSTUDY customer's payment.

What is the percentage of your (and/or your partner's) care of this child?

 %

48 Do you (and/or your partner) receive financial support from a voluntary maintenance arrangement for this child?

No **Go to 50**

Yes **Go to next question**

49 What is the amount of maintenance you (and/or your partner) receive for this child per day, week, fortnight, month or calendar year?

 per


Date this started

 /

50 Do you have another dependent child?

No **Go to next question**

Yes

 Attach a separate sheet with details.
▶ **Go to next question**

Payment details

51 Please read this before answering the following questions.

Payments cannot be made to a dependent student until his/her 16th birthday. A parent/guardian may choose to receive payments if the student is under 18 years of age.

If you are entitled to payments that are not directed to a third party, where do you want your payment made?

Note: If you are a secondary school student, and are 16 or 17 years of age and dependent on your parent(s), your parent(s) can either nominate their account or your account.

The account into which another payment from us is made (if applicable) [] Go to 52

My parent's account nominated below []

My account nominated below []

The bank, building society or credit union account must be in your name. A joint account is acceptable.

Do NOT include an account used exclusively for funding from the National Disability Insurance Scheme.

Name of bank, building society or credit union []

Type of account []

Branch where the account is held []

Branch number (BSB) []

Account number (this may not be your card number) []

Account held in the name(s) of []

52 Name of payment (e.g. Family Tax Benefit) []

Tax details

53 Please read this before answering the following questions.

We need your tax file number before payments can start.

If you have a partner and the student is, or will be, 16 years or over we need their tax file numbers as well.

You are not breaking the law if you do not give us your (and your partner's and the student's) tax file number(s), but if you (and your partner and student) do not provide them to us, or authorise us to get them from the Australian Taxation Office, payments may not be made.

In giving us your (and your partner's and the student's) tax file number in relation to this claim you authorise us to use your (and your partner's and the student's) tax file number for other payments including social security payments and services in future where necessary.

Some people do not need to give their tax file number, including a student under 16 years of age. For a full list of exemptions, refer to Tax details in the Notes Booklet.

Have you (and, if relevant, the student and/or your partner) given us your tax file number(s) before?

No [] Go to next question

Not sure [] Go to next question

Yes [] Go to 55

54 Do you (and, if relevant, the student and your partner) have a tax file number?

You
No [] Please call us on 1800 132 317.
Yes [] Your tax file number [][][]-[][][]-[][][][]

Your partner
No [] Please call us on 1800 132 317.
Yes [] Your partner's tax file number [][][]-[][][]-[][][][]

The student
No [] Please call us on 1800 132 317.
Yes [] The student's tax file number [][][]-[][][]-[][][][]

Checklist

55 Which of the following forms, documents and other attachments are you providing with this form?

If you are not sure, check the question to see if you should attach documents.

Where you are asked to supply documents, please attach original documents. In some circumstances copies may be accepted as detailed in the below checklist.

Claim for ABSTUDY Schooling A form (SY018)
(if you answered Yes at question 5)

Authorising a person or organisation to enquire or act on your behalf form (SS313)
(if you answered Yes at question 9)

Copy of a statement, document or letter indicating reason you live away from home
(if required at question 14)

You may need to provide identity documents.
(if you answered Yes at question 26)
there is a list of acceptable documents in the **Confirming your identity form (SS231)**

Copies of documents which show income for the past 8 weeks
(if you answered Yes at question 28)

Parent(s)/Guardian(s) details for the BASE tax year and CURRENT tax year for dependent Youth Allowance or ABSTUDY customers form (Mod JY)
(if you answered No at question 40)

Details of additional dependent children
(if you answered Yes at question 50)

56 IMPORTANT INFORMATION

Privacy and your personal information

Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by the Australian Government Department of Human Services for administrating payments and services. This information is required to assist with your application or claim.

Your information may be used by the Department, or given to other parties: where you have agreed to that; or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which the Department will manage your personal information, including our privacy policy, at humanservices.gov.au/privacy

57 Please read this before answering the following question.

It is important to read the statement carefully before you sign it. Everyone who provides personal information on the claim must sign the statement.

When you sign it, you are declaring that the information you have provided is true and correct. You are also agreeing to the conditions in the statement.

If the statement is not signed, payments will not start.

Statement

I declare that:

- I, the student, am of Australian Aboriginal or Torres Strait Islander descent, **and**
- I, the student, identify as an Australian Aboriginal or Torres Strait Islander, **and**
- I, the student, am accepted as such by the community in which I live or have lived, **and**
- the information I have provided in this form is complete and correct.

I understand that:

- I, the parent/guardian, am responsible for the payment of any expenses associated with school and board that are not covered by ABSTUDY.
- to retain ABSTUDY, students must attend all classes to the satisfaction of the school.
- giving false or misleading information is a serious offence.
- the Australian Government Department of Human Services can make relevant enquiries to make sure I receive the correct entitlement.
- I must notify the Australian Government Department of Human Services of any changes to this information **within 14 days** of the change(s) occurring.
- the Australian Government Department of Human Services will, from time to time, check with the school nominated on the claim, that the student is enrolled and attending.

Signature of ABSTUDY student (only required if the student is, or will be, 16 years of age or over during the study year)



Date /

Signature of parent/guardian



Date /

Signature of parent's/guardian's partner



Date /

See Returning this form on page 1 of this form.