



HARDSHIP FUND APPLICATION FORM

Student Finance Advisers – student-hardship@vuw.ac.nz

Full name	Student ID#
Preferred name	What degree are you studying?
E-mail	Domestic or International <input type="checkbox"/> Domestic student <input type="checkbox"/> International student
Phone	Campuses attending this trimester <input type="checkbox"/> Kelburn <input type="checkbox"/> Pipitea <input type="checkbox"/> Te Aro
Date of Birth	Year of Study <input type="checkbox"/> UG – First yr <input type="checkbox"/> UG – Mid yr <input type="checkbox"/> UG – Final yr <input type="checkbox"/> Honours <input type="checkbox"/> Postgrad <input type="checkbox"/> Prep Course
Ethnicity	Enrolment type <input type="checkbox"/> Full time <input type="checkbox"/> Part time
Gender identity <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gender Diverse/X	Suburb
Relationship status <input type="checkbox"/> Single <input type="checkbox"/> Divorced/Separated <input type="checkbox"/> Married <input type="checkbox"/> Defacto	Accommodation Type <input type="checkbox"/> At home <input type="checkbox"/> Hall of Residence <input type="checkbox"/> Flat <input type="checkbox"/> Other
Do you have dependent children? <input type="checkbox"/> No <input type="checkbox"/> Yes, ages	How did you hear about the Hardship Fund? <input type="checkbox"/> Previous application <input type="checkbox"/> Other

Please describe your financial problem:

Is there a specific cost you require assistance with?

Student checklist:

- Tuition fees paid
- A recent bank statement or internet banking printout showing at least 2 weeks' transactions
- A recent bank statement or internet banking printout showing all account balances

DISCLOSURE OF INFORMATION

I agree to the Student Finance Advisers having access to my student records, and to the anonymous disclosure of personal information given on this application to the members of the Student Assistance Scheme committee for the purposes related to the assessment of this application. I declare the above information to be true and correct to the best of my knowledge.

Signed _____ Date _____

FINANCIAL SUMMARY

Income (Weekly/Fortnightly/Monthly)	
Student Allowance	
Student Loan	
Accomm. Supplement	
WINZ Benefit	
Family Tax Credits	
Scholarship	
Wages	
Partner's wages	
Family help	
Other	
Total income	

Other funds available	
Savings	
Scholarship/grants	
One-off jobs	
Tax refund	
Bond refund	
Course Related Costs remaining:	
Other	
Total	

Expenses	Weekly	Monthly
Rent/board		
Power/gas		
Phone/internet		
Cell phone		
Groceries/toiletries		
Public transport		
Petrol/parking		
Gym/sports		
Subscriptions		
Insurance		
Bank fees		
Childcare		
Debt repayments		
Other		
Total expenses		
Income - expenses		

Upcoming expenses	
Course costs/textbooks	
Accomm. Costs/Bond	
Trips home	
Transport	
Medical/Optical/Dental	
Immigration costs	
Other	
Total	

Notes: