

Parent/Guardian Income Assessment

This section is to be filled out by your parent(s)/guardian(s)

Your income will need to be verified via tax returns. If tax returns are not available, other forms of evidence can be used such as payslips or a letter from your employer or accountant.

Combined parental income equals the sum of:

- taxable income (a negative amount is counted as zero. The Australian Taxation Office (ATO) consider a loss as meaning the person has no taxable income and often taxation losses can be deducted from future taxable income. A tax loss cannot be offset against the other components of parental income)
- adjusted employer provided reportable fringe benefits including salary sacrifice. The reportable fringe benefit amount as recorded on an applicant's group certificate should be advised and recorded:
 - exempt reportable fringe benefits are automatically converted to the lower adjusted amount using the fringe benefits tax rate
 - other reportable fringe benefits will not be converted. 100 per cent will be included in parental income
- reportable superannuation contributions
- target foreign income (except if received as a gift from an immediate family member)
- total net investment losses
- tax free pensions and benefits
- **less** maintenance paid. (i.e. child support)

NOTE: in shared custody situations (including parents separated under one roof), the parent with primary care responsibility should be used. In 50/50 shared care situations the applicant may nominate which parent they want to use.

1. Is your combined income over \$250,000 for the previous tax year? YES NO

If you answer yes to the question above, your child is not eligible for the payment.

2. What was/is your taxable income for the previous tax year?

3. If your combined income is over \$250,000, have you experienced a loss in combined income since the PREVIOUS tax year that reduces it to below \$250,000? YES NO

If you answer yes to the question above, you must provide evidence with this application on the loss of combined income.

4. If your child is under 18, nominate a bank account into which the payments will be made.

You only need to complete question 2 if the applicant is under 18 years of age.

Payments are usually paid into your account, but you may authorise the payments to go into your child's account. If you authorise the payment to go into your child's account fill out question 6.

5. Name of bank, building society or credit union:

Account Name:

BSB:

Account Number:

Parent/Guardian Information

Parent/Guardian 1 details

Mr / Mrs / Miss / Ms / Other

Family Name:

First Given Name:

Second Given Name:

Home Phone:

Mobile Number:

Email:

Address:

Suburb:

State/Territory:

Postcode:

Parent/Guardian 2 details

Mr / Mrs / Miss / Ms / Other

Family Name:

First Given Name:

Second Given Name:

Home Phone:

Mobile Number:

Email:

Address:

Suburb:

State/Territory:

Postcode:

Parent/Guardian Signature and Declaration

The privacy and security of your personal information is important and is protected by law. This information is being collected to provide the Tertiary Access Payment to the Applicant. Your information will be shared with the Department of Education, Skills and Employment for the purposes of administering the Tertiary Access Payment Program. Your information will not otherwise be shared with other parties unless you have agreed, or where the law allows or requires it. You may be contacted, using the contact details you provide in this form, to discuss the information you have provided. For more information about how the Department of Education, Skills and Employment will deal with your information, go to <https://www.dese.gov.au/privacy>

Parent/Guardian 1 Declaration

- I declare that the information I have provided in this form is complete and correct.
- I consent to the:
 - education provider contacting me in relation to the information I have provided in this form;
 - education provider giving the information I have provided in this form to the Department of Education, Skills and Employment for the purposes of the Tertiary Access Payment Program; and
 - Department of Education, Skills and Employment using the information I have provided in this form to administer the Tertiary Access Payment Program.

Signature:

Date:

Parent/Guardian 2 Declaration

- I declare that the information I have provided in this form is complete and correct.
- I consent to the:
 - education provider contacting me in relation to the information I have provided in this form;
 - education provider giving the information I have provided in this form to the Department of Education, Skills and Employment for the purposes of the Tertiary Access Payment Program; and
 - Department of Education, Skills and Employment using the information I have provided in this form to administer the Tertiary Access Payment Program.

Signature:

Date: