

## SMALL DONATIONS PROGRAM - APPLICATION FORM

# Educational support

### GRADUATE CERTIFICATE IN COMMUNITY LEADERSHIP AND RESILIENCE SCHOLARSHIP AT CHARLES STURT UNIVERSITY

#### APPLICANT'S DETAILS

Name

Postal address:

Phone:

Mobile:

Email:

#### BANK ACCOUNT DETAILS FOR PAYMENT

BSB No:

Account No:

Account Name:

Bank:

#### DECLARATION

Evidence of enrolment in the Graduate Certificate in Community Leadership and Resilience Scholarship at the Charles Sturt University attached

I certify to the best of my knowledge that the statements made in this application and any supporting documentation are true.

Signed

Date

Print name

The information you provide will be handled in accordance with the Privacy and Personal Information Protection Act 1998. The supply of information by you is voluntary. If you cannot provide or do not wish to provide the information sought, your application may be unable to be processed. Any personal information collected from you will be in order to process your application.