## Department of Education

## 2025 SECONDARY ASSISTANCE SCHEME YEARS 7 - 12

Valid to claim with Parent/Guardian card only. Student cannot claim with own card if living with parent(s)

**\$300 Clothing Allowance -** Paid to parent **\$235 Education Program Allowance -** Paid to school

NG

**APPLICATIONS CLOSE** .

**FRIDAY** 

11 APRIL 2025

GOVERNMENT OF

If living as an independent student, letter of proof from Centrelink must be provided.

**CLOSE** • Not eligible if student born in 2006 or before.

Please complete form neatly andn **block** letters and retain a copy at the school.

Submit your form to your school.

SCHOOL NAME (Please use school stamp including phone number if possible)

CONCESSION CARD PARENT/GUARDIAN INFORMATION	FIRST WAR
LAST NAME – as per concession card	FIRST NAME – as per concession card
STREET ADDRESS (EG: 15 Jones Road)	SUBURB POSTCODE
CONTACT PHONE No.	E-MAIL
CONCESSION CARD PARENT/GUARDIAN) DETAILS	
Centrelink Health Care Card (Family Card only NOT Student card)	link veterans' Affairs Pensioner Card (Blue card only – expires Dec 2025)
CARD No. (CRN OF PARENT/GUARDIAN): (as per Centrelink Card)	
	CARD EXPIRY DATE:
STUDENT DETAILS (As listed on parent concession card) INDEPENDENT STUDENT (Attach letter from Centrelink)	
LAST NAME FIRST NAME	DATE OF BIRTH YEAR
BANK ACCOUNT DETAILS OF PARENT/GUARDIAN (Payments will only be made by EFT – Please write clearly)	
Name of Account Holder(s):	
BSB Number: (6 digits) — — — Account Number: (up to 9 digits) — — — — — —	
PARENT/GUARDIAN DECLARATION	
I have <b>not</b> claimed this allowance for any of these children at another school in Western Australia in 2025.	
I authorise the Centrelink to verify my current benefit status and other pertinent details to gain this entitlement.	
I DECLARE THE ABOVE TO BE TRUE AND CORRECT AND AM AWARE THAT IT IS AN OFFENCE TO PROVIDE FALSE OR MISLEADING INFORMATION.	
DADENT/CHARDIAN CIONATURE	DATE
PARENT/GUARDIAN SIGNATURE:	to sign this form please check this box to confirm the above
information is true and correct.	
If statements made in this application later prove to be false or misleading this application may be declined. Information supplied will be checked by the school.	
SCHOOL WITNESS DECLARATION (Concession card and application must be sighted & witnessed at attending school by a School Officer)	
I have sighted the claimant's card and confirm the details provided are correct and no other application has been	
submitted for students listed on this form.	
PRINT NAME OF WITNESS WITNESS SIGNA	ATURE POSITION HELD DATE
If the form is completed and dated prior to the start of Term 1 complete the commencement confirmation below (tick box and enter	
current date).  I confirm that the above student(s) has/have commenced at this school in Term 1, 2025 DATE:	