

Veronica Husted Community Values Scholarship

Form Preview

Eligibility

* indicates a required field

Before you begin

Before completing this application form, ensure you have read the program guidelines. Incomplete applications received after the closing date will not be considered.

If you have any questions about these eligibility criteria, please contact the funder.

Scholarship privacy disclosure statement

Bendigo & Adelaide Bank Limited ABN 11 068 049 178 AFSL 237879 The Bendigo Centre,
Bendigo VIC 3550 PH 1300 304 541

1. Collection of your personal information

We, Bendigo and Adelaide Bank Limited and Bendigo Bank Community Foundation, collect your personal information to assess your application for a scholarship/grant and administer any scholarship/grant provided to you. If you provide incomplete or incorrect information we may be unable to assess your application.

1. Use and disclosure of your personal information

We treat your personal information as confidential and only disclose it to others where necessary. Your personal information is provided to the relevant scholarship/grant selection committee to assess your application.

Scholarship/grant selection committees may include any of the following parties:

- Chairman, nominated Directors and staff of Bendigo and Adelaide Bank Limited and/or its subsidiary companies
- Directors and staff of local Community Bank companies offering the scholarship
- Local citizens with special expertise (e.g. school principals)
- Staff from universities, secondary colleges or any organisation/club/group partnering with Bendigo and Adelaide Bank Limited to offer scholarships.

Your personal information may also be disclosed to related Bendigo and Adelaide Bank Group entities, our joint venture partners and Community Bank companies. Confidentiality is maintained at all times. If you have provided a referee to support your application, we may contact that referee and disclose relevant personal information contained in your application. If you are awarded a scholarship some of your personal information may be published on the Bendigo and Adelaide Bank Limited website. This information will include your full name, hometown, university name and course title.

1. Access to and correction of your personal information

In most cases you can gain access to and correct your personal information. Please contact us if you have an enquiry about your information:

Bendigo Bank Community Foundation, PO Box 480, Bendigo, Vic 3552 Phone: 1300 304 541
OR Email: foundation@bendigobank.com.au

OR

Veronica Husted Community Values Scholarship

Form Preview

Bendigo Bank, PO Box 480, Bendigo Vic 3552 Phone: 1300 236 344 OR Email: contactus@bendigobank.com.au

1. Privacy Policy

You should also read our Privacy Policy. It contains information about:

- How to correct your personal information
- How to complain about a breach of the privacy laws by us and how we deal with a complaint
- Our disclosure of personal information to overseas entities, and where practicable, which countries those recipients are located in.

You can obtain a copy of the Privacy Policy from:

Bendigo and Adelaide Bank Limited at www.bendigobank.com.au/public/privacy-policy/full-privacy-policy

Bendigo Bank, PO Box 480, Bendigo Vic 3552 Phone: 1300 236 344 OR Email: contactus@bendigobank.com.au

Bendigo Bank Community Foundation, PO Box 48, Bendigo, Vic 3552 Phone: 1300 304 541 OR Email: foundation@bendigobank.com.au

Community Enterprise Charitable Fund ABN 12 102 649 968 (the Fund), The Bendigo Centre, Bendigo VIC 3550

Sandhurst Trustees Limited ABN 16 004 030 737, AFSL 237906, a subsidiary of Bendigo and Adelaide Bank Limited ABN 11 068 049 178, AFSL 237879, is the trustee of the Fund.

Privacy notice

Bendigo Bank will respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the Privacy Act 1988 and amended by the Privacy Amendment (Enhancing Privacy Protection) Act 2012. Please view our privacy statement [here](#).

Acceptance

Do you agree to the scholarship privacy disclosure statement? *

☐ I agree

Do you consent to the collection of your sensitive information? *

☐ I consent

Contact details

* indicates a required field

Applicant information

Applicant *

First Name

Last Name

Veronica Husted Community Values Scholarship

Form Preview

Address *

Address

Is this address located within the area specified in the program criteria?

- ☐ Yes ☐ No

Eligible address *

Address

(eg. family home, or school address - demonstrate your connection to our community)

Phone number *

Must be an Australian phone number.

Email address *

Must be an email address.

Gender *

- ☐ Male
☐ Female
☐ Gender diverse
☐ Prefer not to respond

Do you identify with any of the following? *

- ☐ A carer for a family member (e.g. siblings, parent, guardian)
☐ Person from culturally and linguistically diverse background
☐ Person with a disability
☐ A member of the LGBTQIA+ community
☐ None of the above

You can choose more than one option

Are you an Australian citizen or permanent resident? *

- ☐ Yes ☐ No

Do you identify as Aboriginal and/or Torres Strait Islander? *

- ☐ Yes ☐ No

Veronica Husted Community Values Scholarship

Form Preview

Optional: please upload your confirmation of identity - Verification for Aboriginal and Torres Strait Islander people form

Attach a file:

Age confirmation

Month of birth *

Year of birth *

As of today, are you 18 years of age or older?

*

☐ Yes

☐ No

Secondary contact

*

First Name

Last Name

Phone number *

Must be an Australian phone number.

Email *

Relationship to applicant *

Parent/guardian

*

First Name

Last Name

Phone number *

Must be an Australian phone number.

Email *

Please note: Should this application be successful, a scholarship agreement will be sent to the **student's email address** so please ensure it is actively monitored. As parent/guardian, you will need to print and sign a component of the scholarship agreement.

Relationship to applicant *

Veronica Husted Community Values Scholarship

Form Preview

What type of scholarship are you applying for? *

☐ Secondary School

How did you hear about this scholarship? *

☐ Local Community Bank
branch

☐ School

☐ Social media

☐ Bendigo Bank website

☐ Careers advisor

☐ Friend or family member

☐ Bendigo Bank branch

☐ Local advertising

☐ Other:

Name of program/course you are/will be undertaking. *

Are you from a single income family? *

☐ Yes

☐ No

Do you (or your guardian) have a Health Care Card or a Concession Card? *

☐ Yes

☐ No

Please select your type of employment *

☐ Full time

☐ Part time

☐ Casual hours

☐ Not currently working

Are you the first person in your immediate or extended family to pursue a higher education? *

☐ Yes

☐ No

Education and achievements

*** indicates a required field**

History/background

Current or last educational institution attended *

Educational institution location *

Address

Suburb/Town, State/Province, and Postcode are required.

Highest level of education attained *

What year was this? *

Veronica Husted Community Values Scholarship

Form Preview

If you have not received your score yet, you can save your application and complete at a later date.

If you have never received a rank, select 'Other' and put '0' as your rank score.

Rank Type *

☐ ATAR

☐ OP

☐ IB

☐ Other:

Rank Score *

Must be a number.

Have you studied at University before? *

☐ Yes

☐ No

Have you studied at TAFE before? *

☐ Yes

☐ No

About you

Tell us about yourself. *

Word count:

Must be no more than 250 words.

Describe your achievements at school, in your community and any leadership roles to support your application. *

Word count:

Must be no more than 150 words.

In what ways do you see your role in this community? *

Leadership roles

Example 1

Word count:

Must be no more than 15 words.

Example 2

Word count:

Must be no more than 15 words.

Example 3

Word count:

Must be no more than 15 words.

Veronica Husted Community Values Scholarship

Form Preview

Example 4

Word count:

Must be no more than 15 words.

Tell us about your future study and career aspirations, and discuss what inspired you to undertake the studies for which you have been accepted. *

Word count:

Must be no more than 300 words.

Describe the challenges and level of financial disadvantage that you have faced during your education and which may hinder your ability to undertake further study. *

Word count:

Must be no more than 250 words.

Please share other challenges you have faced during your education.

Word count:

Must be no more than 250 words.

Please outline what impact receiving this scholarship will have on attending High School. *

Word count:

Must be no more than 200 words.

Are you willing and able to participate in Community Bank Sanctuary Point & Districts publicity if you are successful? *

☐ Yes

☐ No

Referee details

This person is not related to you; it could be a teacher, a person in the community who knows you.

Please ensure you have advised your referee of your application, as they may be contacted if your application progresses.

Referee *

First Name

Last Name

Veronica Husted Community Values Scholarship

Form Preview

Phone number *

Must be an Australian phone number.

Email *

Relationship to applicant *

Future education details

* indicates a required field

Course provider/educational institution *

Select: Secondary school > NSW - secondary school

Name of your secondary school provider *

School/campus location *

Address

Suburb/Town, State/Province, and Postcode are required.

What type of course are you undertaking? *

Select: Secondary school > Secondary school other

Field of study *

Name of course (grade or year) *

Please write the grade/year you are going into e.g. Year 11

Veronica Husted Community Values Scholarship

Form Preview

Second subject field of study (double degree) *

Name of course (double degree) *

Planned course duration *

Must be a number.

Years / months / weeks *

Study schedule *

☐ Full time

☐ Part time

Month your course begins *

Year your course begins *

Will you have to relocate or move out of home to undertake your studies? *

Will you be studying on/off campus *

Financials and supporting documents

*** indicates a required field**

Course costs

What expenses will you incur for your study over the next 12-months and approximately how much will each cost?

E.g. Accommodation costs, course costs (excluding HELP), study-related materials/equipment, textbooks, tutoring and/or education related travel (within Australia).

Click the 'Add more' button to add rows.

Category	Cost (\$)
	Must be a dollar amount.
	\$

Income

What do you estimate your income will be over the next 12 months?

Veronica Husted Community Values Scholarship

Form Preview

Source of Income	Amount (\$)
e.g. part time job, Services Australia allowances, student payments.	Must be a dollar amount.
	\$

Have you applied for or received any other funding (including other scholarships) towards your education? *

☐ Yes

☐ No

Applied for/confirmed funding	Value (\$)
other grants / bursaries / gifts / scholarships	Must be a dollar amount.
	\$

Mandatory supporting documentation

Please note, you can save your application and return to upload the following required documents at a later date.

Letter of offer (from the institution you are applying to) *

Attach a file:

Proof of score (your most recent academic score to support your application) *

Attach a file:

Optional supporting documentation

The following support documents are optional:

- Referee letter
- Images (e.g. to show your community involvement, aspirations, passions etc.)
- Other supporting documents

Attach a file:

More than one file can be uploaded.

Supporting documentation

Please feel free to upload any of the following documents to support your application:

Veronica Husted Community Values Scholarship

Form Preview

- Referee letter
- Images
- Other supporting documents

Attach a file:

More than one file can be uploaded.

Certification

* indicates a required field

This section must be completed by an appropriately authorised person; this needs to be the parent/guardian listed in this application if the applicant is aged under 18.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if this scholarship is approved, we will be required to accept the terms and conditions in the scholarship agreement.

Certification *

☐ I agree