

# SEDISEF LOAN APPLICATION FORM

**NB: When completed, this application form, together with all other documentation, is to be sent to:**

**Mr Geoff Adams  
SEDISEF Executive Officer  
9 Morgan Court  
MOE, Victoria, 3825**

## **SECTION ONE: APPLICANT'S PERSONAL DETAILS**

Given Names \_\_\_\_\_

Family Name \_\_\_\_\_ Sex \_\_\_\_\_ Male / Female

Term Address \_\_\_\_\_

Town/City \_\_\_\_\_ Post Code \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Student ID \_\_\_\_\_

Overseas Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Passport No. \_\_\_\_\_ Expiry Date \_\_\_\_\_

Place of Issue \_\_\_\_\_ Date of Issue \_\_\_\_\_

Visa No. \_\_\_\_\_ Expiry Date \_\_\_\_\_

Years in Aust \_\_\_\_\_ Date of Entry \_\_\_\_\_

Name of Institution \_\_\_\_\_ Campus \_\_\_\_\_

Course \_\_\_\_\_

Year of Study \_\_\_\_\_ Course Length \_\_\_\_\_

Parent, Guardian or Guarantor \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION TWO: LOAN DETAILS**

**Part A**

I hereby apply for a SEDISEF loan for the following amount: \_\_\_\_\_  
(Normal limit is \$500, maximum is \$1000)

I wish to borrow this money for: \_\_\_\_\_ months commencing on the: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(maximum period is 6 months)

with repayments of: \$ \_\_\_\_\_ per: fortnight / month / one lump sum  
(delete those that do not apply)

and a final payment of: \$ \_\_\_\_\_ to be paid in full by: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Part B**

Please describe the nature/circumstances of your financial emergency:

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**Part C**

Please describe how any funds will be used:

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**Part D**

Please advise how the loan will be repaid:

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**SECTION THREE: FINANCIAL INFORMATION**

**Income (Per Week)**

Parental/other allowance \$ \_\_\_\_\_

Wages \$ \_\_\_\_\_

Other (specify) \$ \_\_\_\_\_

\$ \_\_\_\_\_

**TOTAL INCOME PER WEEK** \$ \_\_\_\_\_

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**Living Expenses (Per Week)**

Rent/Accommodation \$ \_\_\_\_\_

Food \$ \_\_\_\_\_

Clothing \$ \_\_\_\_\_

Gas/Electricity \$ \_\_\_\_\_

Telephone \$ \_\_\_\_\_

Books/Course Materials \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_

Public Transport \$ \_\_\_\_\_

Car Expenses \$ \_\_\_\_\_

Sport \$ \_\_\_\_\_

Entertainment \$ \_\_\_\_\_

Other (specify) \$ \_\_\_\_\_

\$ \_\_\_\_\_

**TOTAL EXPENSES PER WEEK** \$ \_\_\_\_\_

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**Difference Between Total Income And  
Total Expenses (+ or -)** \$ \_\_\_\_\_

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**SECTION FOUR: APPLICANT'S DECLARATION**

**I solemnly and sincerely declare that:**

1. I hereby apply for financial assistance on the basis of the true and complete information furnished by me on and attached to the accompanying application form.
2. My means are such as to make it difficult for me to complete my course of study unless the assistance herein requested is made available to me.
3. I undertake that, if assistance is granted me, I will notify SEDISEF, in writing, immediately *of any* change in my address; *any* change in address of my parents/guardian; assistance received from other sources; cessation, discontinuation or deferment as a student; or *any* change in my financial circumstances during the year.
4. I understand that, if granted, this loan agreement will be a legally binding contract between SEDISEF and myself. I further understand that I am required to repay the amount borrowed on, or by, the dates agreed to, unless otherwise formally negotiated with the SEDISEF.
5. I understand that if I fail to repay the loan by the due date, SEDISEF reserves the right to contact my institution.
6. I understand that failure to repay the loan may result in SEDISEF contacting my parent/guardian for reimbursement.
7. I authorise SEDISEF to obtain information relevant to this application or repayment of this Loan from my institution and my parent/guardian.
8. I authorise that SEDISEF may inform my institution and my parent/guardian of any details relevant to this application or repayment of this Loan.

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**NAME OF APPLICANT:** \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**NAME OF WITNESS:** \_\_\_\_\_

**SIGNATURE OF WITNESS:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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**DO NOT FORGET TO ATTACH THE FOLLOWING TO YOUR APPLICATION FORM:**

1. **Copy of your PASSPORT**
2. **Copy of your VISA**
3. **Copy of your STUDENT ID**

**NB: These documents MUST be sighted and verified by your supporting staff member**

**SECTION FIVE: SUPPORTING COMMENTS & REMARKS**

Comments by International Student Adviser, Counsellor or Financial Officer:  
(Please advise SEDISEF of any assistance this student has already received from your institution)

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**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**SEDISEF USE ONLY**

EO's  
Comments \_\_\_\_\_  
\_\_\_\_\_

EO's  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Trustee (1)  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Trustee (2)  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_