

holmesglen

APPLICATION FORM 2025 Holmesglen Asylum Seeker Scholarship

THE ASYLUM SEEKER SCHOLARSHIP PROGRAM

Holmesglen is proud to have a comprehensive Scholarship Program available for the benefit of students who wish to undertake vocational education programs. The program is aimed at facilitating a range of values which the Institute has always embodied. The core values of the Institute are Ambition, Scholarship, Passion, Integrity, Respect and Excellence.

Holmesglen's most valuable assets are our learners and our scholarship programs are designed to invest and empower our students and apprentices to achieve their educational goals.

The Asylum Seeker Scholarship is designed to empower people living in Australia as asylum seekers by helping them to achieve their educational goals.

SCHOLARSHIP CONDITIONS

- 1. Scholarships are not available to Holmesglen Institute employees or their immediate families or associates
- 2. Selection panel decisions cannot be appealed against and no correspondence
- concerning decisions will be entered into 3. Only one scholarship can be awarded to an
- individual during their time at Holmesglen.
- 4. The scholarship money will be provided in the year of 2025 on a semester by semester basis, and must be used for the payment of fees. The scholarship is in no way intended to cover all tuition or living costs for the year.
- 5. Incomplete applications will not be considered
- 6. Student must make an appointment with a counsellor or welfare officer to assist with application

VALUE

Up to \$2,000 for students studying Diploma or certificate level courses. Scholarship value is not intended to cover all tuition costs for the year.

INSTRUCTIONS & APPLICATION PROCESS

Before completing this form, please ensure that you have carefully read the Scholarship Terms and Conditions Form to see if you meet the requirements to apply for this scholarship. Please note that only one application per person can be submitted.

HOW TO SUBMIT YOUR APPLICATION

- Step 1: Complete application form on-line or hardcopy
- Step 2: Contact Student Wellbeing on 9564 1649 (Chadstone and Bourke St campuses), 9564 6317 (Glen Waverley) or 9209 5680 (Moorabbin) to make an appointment with a Counsellor/Student Welfare Officer who will assist you.
- Step 3: Please ensure that you bring all requested documentation to support your scholarship application.

IN PERSON:

- Student Wellbeing Offices
- Chadstone Campus C7.1.12
- Glen Waverley Campus W1.1.29
- Moorabbin Campus M4.1.303

BY EMAIL:

studentwellbeing@holmesglen.edu.au

Please complete the form and bring it together with your supporting evidence

APPLICANT NAME

ELIGIBILITY CHECKLIST

Are you a currently seeking asylum and do you hold a bridging visa with the right to study; hold a Safe Haven Enterprise Visa (SHEV); or hold a Temporary Protection Visa (TPV)?	YES	NO 🗌
Are you a prospective, current full time or part time student at Holmesglen?	YES	NO
Are you studying a Certificate or Diploma vocational program?	YES	NO
Can you maintain satisfactory attendance and course progress?	YES	NO
Are you in receipt of any other scholarship, VET student loan, fee HELP or other government schemes including jobtrainer or free TAFE?	YES	NO 🗌
Are you a family member of a Holmesglen employee or an education agent?	YES	NO
Appointment made with Student Wellbeing Department	YES	NO

Personal Details

First Name:			
Last Name:			
Banner ID:	Date of Birth:		
Course (please use accurate course title):			
Email address:			
Postal Address:			
Suburb:			State: Postcode:
Home Telephone: Wo	ork Telephone:	Mobile:	

Status (please tick)

Enrolled	
Pre enrolled	

LCC2

Paid
Unnaid

Unpaid	

Living circumstances

	No	fixed	address
--	----	-------	---------

- Living with Parents
- Living alone

Living in shared accommodation

Living with Partner

No. of dependent children in household:

Additional Information:

••••••	 	
••••••	 	

Employment/Financial
Select all that are relevant to you:
Unemployed with no income support
Government benefits (e.g. Centrelink Allowance/Pension/VET)
Casual/Part-time
Full-time
Self-employed
Additional Information:

Provide a statement of commitment to completing the course:

Provide a statement of no more than 500 words explaining;

Why you chose this course. What completing the course would do for you in the future. How the scholarship would help you with your studies:

Previous Study (If applicable)

Course:																						
Institution:				 				 														_
Level reached:					Ċ											Las	t yea	ar of	atte	ndai	nce:	_
Course:																						
		1	1			1	1 1		I.	1	1	1	I.	1	1	1		1	1	I		1
Institution:																						
Level reached:																Las	t yea	ar of	atte	ndai	nce:	

Current Employment (If applicable)

	scriptio	n:																																
Name a	ame and address of employer:																																	
						1					Ì																							
Suburb	:																				-	-	-		_		Sta	ite:			Pos	tcod	le:	
Date co	mmen	ced:																												_				
	//		/						F	ull	time	[Part	tim:	ne																			
Job des	scription	n: 									ĺ																			1				
									 	 		1				 		1		1	1	1	 	-		 			-	-				
Name a	and add	dress	of em	nploy	/er:																													
Name a	and add	dress (of em	nploy	/er:																													
		dress (of em		/er:																													
Name a		dress (of em	nploy	/er:																						Sta	 			 		le:	
		dress (of em		/er:																						Sta	 			Pos		le:	

List previous scholarships (If applicable)	Was the Scholarship Awarded?
	Yes No
	Yes No
	Yes No

Declaration

Applicants Name:	
 As a Student at Holmesglen Institute, I have not been suspended or had any disciplinary action taken against me. I declare that the information on this form is true and accurate to the best of my knowledge. I have made this claim for a Scholarship payment, fully aware that any false statements can lead to withdrawal/refu to me being prosecuted. I understand that the application can be refused if all relevant information is not provided. 	isal of any financial support and may lead
Applicants Signature:	Date:

Counsellor/Welfare Worker's Name:

Counsellor/Welfare Worker's Signature:

Date:

FOR OFFICE USE ONLY

Assistance requested	Assistance Granted	Application denied	Reason:	
Amount: \$	Amount: \$			
Date received:		Respo	nse & oı	itcome: