CQUNICARES EMERGENCY GRANT APPLICATION



The CQUniCares Emergency Grant provides financial assistance to low-income students who are experiencing financial hardship as a result of an unanticipated or emergency situation.

Applicants will need to demonstrate the impact of the situation on their ability to complete their studies.



YOUR PERSONAL DETAILS

CQUniversity student number				
Given name/s				
Family name				
Mobile				
Home address				
Are you an Australian or New Zeal (must have a permanent home ad-	and citizen or holder of an Australian Permanent Visa? dress in Australia)	Yes	No	
Have you successfully completed at least one term of study at CQUniversity?		Yes	No	
Have you received a CQUniCares Emergency Grant in the last 12 months?		Yes	No	
Are you a cross-institutional stude	nt (your home institution is not CQU)?	Yes	No	
PERSONAL STATEMEN	ī			
Write a personal statement (maxir Grant would help assist you in ord	num 250 words) that outlines your current circumstances an er to continue your studies.	d how the CQUr	niCares Emergency	

APPLICATION CHECKLIST

I declare that the information provided is to the best of my understanding and knowledge, complete and correct. I understand that there are penalties for providing false or misleading information. I am aware that the University may share the information in this application with a third party. I give my permission for the University to supply any relevant official records in accordance with the emergency grant criteria and privacy legislation.

Applicant signature	Date	
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