(CONFIDENTIAL)



Relationship to student					
Surname					
Given Names					
Date of Birth					
Address					
Email Address					
Telephone No.	H:	V	V:	M:	
PERSONAL DETAILS	S (Parent 2/G	uardian)		<u>, </u>	
Relationship to student		·			
Surname					
Given Names					
Date of Birth					
Address					
Email Address					
Telephone No.	H:	V	V:	M:	
	_				
Name and Age of Depend	lent Children	School Attend	ded		
	<u> </u>	•			

Vision

Hutchins provides an inspirational education where each boy strives to achieve his personal best and is willing to serve his community as an informed and active citizen; locally, nationally and globally.

Mission

(CONFIDENTIAL)



II EMPLOYMENT DET	AIL	S (Parent 1	/Guardian)			
Employer's Name						
Employer's Contact Perso	n					
	Ph:					
Employer's Address						
Occupation/Title						
☐ Full Time ☐	Pa	rt Time	☐ Self I	Employed	Casual	Other
Annual Gross Salary		\$				
If self-employed:		1				
Accountant's Name						
Accountant's Address						
EMPLOYMENT DET	TAIL:	S (Parent 2	/Guardian)			
Employer's Name						
Employer's Contact Perso	n					
	Ph:					
Employer's Address						
Occupation/Title						
☐ Full Time ☐	Pa	rt Time	☐ Self I	Employed	Casual	Other
Annual Gross Salary		\$				
If self-employed:						
Accountant's Name						
Accountant's Address						
		•				

Visio

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Mission

(CONFIDENTIAL)



Ш	CURRENT ACCOUNTS WITH FINANCIA	INSTITUTIONS INCLUDING LOANS	, CREDIT CARDS AND SAVINGS DETAILS
---	--------------------------------	-------------------------------------	------------------------------------

	Financial Institution	Account No.	Account Type	Account Limit in \$	Current Balance in \$
1.					
2.					
3.					
4.					

	IV	FINA	NCIAL	DETA	AILS
--	----	------	-------	------	-------------

Monthly Income	Monthly Expenses

V ASSETS AND LIABILITIES

(To be separately identified and estimated value stated)

Assets

Item	Value \$
Property:	
Accounts with Financial Institutions:	

Visior

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Motor Vehicles:		
Shares/Trusts:		
Life Insurance/Superannuation:		
Personal Property (furniture & jewellery etc.):		
	Total Assets	
Liabilities		
Item		Value \$
Mortgage:		
Personal Loans:		

Visior

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Credit Cards:	
Other Loans:	
Total	Liabilities
VI OTHER RELEVANT INFORMATION	

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	DO YOU RECEIVE OUTSIDE ASSISTANCE TO COVER SCHOOL EXPENSES (e.g. son's grandparents, Family Trust)
<u> </u>	
VIII	IF YOU ARE SELF-EMPLOYED , please provide a copy of the most recent audited Financial Statement for your business.
IX	IF YOU ARE EMPLOYED (AND SECTION VIII ABOVE DOES NOT APPLY TO YOU), please provide a copy of the most recent ATO Notice of Assessment for you.
x	DECLARATION
x	DECLARATION I confirm that the above information is complete and correct.
x	
x	I confirm that the above information is complete and correct. I authorise the Hutchins School through its Business Manager or Headmaster to contact organisations and persons named herein to obtain confirmation and clarification of the responses in this Questionnaire.
x	I confirm that the above information is complete and correct. I authorise the Hutchins School through its Business Manager or Headmaster to contact organisations and

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