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Please note: An NT Government Student Assistance Application MUST be submitted, prior to a claim being accepted. The application form is available on the Department Website at [www.education.nt.gov.au/grants/funding/general/sas](http://www.education.nt.gov.au/grants/funding/general/sas). If you cannot download an application form, please contact the Finance Student Assistance Officer as noted below.

**Financial Services - Student Assistance - GPO Box 4821, DARWIN NT 0801**

**Tel:** (08) 8901 4965 **Free call:** 1800 019 157 **Email**: studentassistance.det@nt.gov.au

**20\_\_\_\_ NT SCHOOLS OF THE AIR STUDENT FUNCTIONS ALLOWANCE**

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**Name of claimant (1) …**…………………………………………................. **Name of claimant (2)** …………..……………………………….....................

**Home address**……………………………………………............................... **Postal address** …….………………………………………............................

**State** .............................................**Postcode** ............................................. **State** .............................................**Postcode** ............................................

**Email address** ……….………………………………..........................................................................................................................................................

**Home ph** .......................................................................**Work ph** ……………......................................... **Mobile**…….……………………………..............

I certify the following:

* The student/s attended the School of the Air Function on the days stated in the claim; and
* The claimant did not receive reimbursement for travel assistance by the School of the Air.

Signature of Principal / Registrar……...…………………………………………. ………………….Date.…………….……………………

##### CERTIFICATION BY SCHOOL PRINCIPAL / REGISTRAR

Date………….………… From………………………………….………… To.………………………………………. **kms** (each way)…………..…. ..

Date……………….…… From……………………………….…………… To.………………………………………. **kms** (each way)……..………...

Date……………….…… From………………………………….………… To.………………………………………. **kms** (each way)……..………...

Date…………….……… From……………………………….…………… To.………………………………………. **kms** (each way)……..………...

I declare the following:

* the information and distance stated on this form are true and correct; and
* all journeys claimed were **undertaken by private vehicle.**

Signature of claimant (1) ………………………………………………………........ Date …………………………………………………………………..….......

Signature of claimant (2) …………………………………………………………. Date …………………………………………………………………..….......

##### DETAILS OF TRAVEL BY PRIVATE VEHICLE

**Example given:**

**From:** - The students Principal Place of Residence. **To:** - The School of the Air Function

**From:** **-** The School of the Air Function **- To:**- The students Principal Place of Residence

Vehicle Type……………………………………..Registration No……………………………………....

**PRIVATE VEHICLE DETAILS**

…………………………………………….**School of the Air**

**Type of Function**…………………………………………...

**Student Name/s**

................................................................................

**Dates of function**

………..…….....to…………………

**STAMP OF SCHOOL / INSTITUTION**

Attach all ticket receipts and boarding passes.

##### COST

Date……….…………… From………………………….………………… To.……………………………………….……………….

Date……….…………… From………………………….………………… To.……………………………………….……………….

$

### Total of Tickets

$ …..……….....

$ ……..…….....

##### DETAILS OF STUDENTS TRAVEL BY BUS, RAIL OR AIR, TO THE POINT OF PICK UP