



Department of
Education

2026 SECONDARY ASSISTANCE SCHEME YEARS 7 - 12

\$115 Clothing Allowance Paid to parent or school
\$235 Education Program Allowance Paid to school

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APPLICATIONS CLOSE

**THURSDAY
2 APRIL 2026**

- Valid to claim with Parent/Guardian card only. Student cannot claim with own card if living with parent(s).
- Not eligible if student born in 2007 or before.
- If living as an independent student, letter of proof from Centrelink must be provided.
- Please retain a copy of the application form at the school
- The Education Program Allowance (EPA) of \$235 for students will be paid to the school and will be applied towards education program charges in the first instance.

SCHOOL NAME	SCHOOL CODE
Newton Moore Senior High School 19-35 Hotchin Street SOUTH BUNBURY WA 6230 Phone: 9722 2400	4040

CONCESSION CARD PARENT/GUARDIAN INFORMATION

LAST NAME - as per concession card		FIRST NAME - as per concession card	
STREET ADDRESS (EG: 15 Jones Road)		SUBURB	POSTCODE
CONTACT PHONE No.		E-MAIL	

PARENT/GUARDIAN SERVICES AUSTRALIA (CENTRELINK) CONCESSION CARD DETAILS

- ☐ Centrelink Health Care Card (Family Card only NOT Student card) ☐ Centrelink Pensioner Concession Card ☐ Veterans' Affairs Pensioner Card (Blue card only – expires Dec 2025)

CARD No. (CRN OF PARENT/GUARDIAN):

(as per Centrelink Card)

CARD START Date:

CARD EXPIRY Date:

STUDENT DETAILS

☐ **INDEPENDENT STUDENT** (Attach letter from Centrelink)

WA STUDENT NUMBER	SURNAME/FAMILY NAME	FIRST NAME	DATE OF BIRTH	YEAR LEVEL	CLOTHING ALLOWANCE TO BE PAID TO (tick)
					☐ SCHOOL ☐ PARENT
					☐ SCHOOL ☐ PARENT
					☐ SCHOOL ☐ PARENT

Payments will only be made by EFT – Please write clearly

Name of Account Holder(s):

BSB Number:(6 digits)

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Account Number: (up to 9 digits)

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PARENT/GUARDIAN DECLARATION

- I have **not** claimed this allowance for any of these children at another school in Western Australia in this school year.
- I authorise Centrelink to verify my current benefit status and other pertinent details to gain this entitlement.

I declare the above information to be true and correct and I am aware that it is an offence to provide false or misleading information.

PARENT/GUARDIAN SIGNATURE:

DATE:

☐ If completing this form electronically and are unable to sign the form, please check this box to confirm the above information is true and correct. If statements made in the application later prove to be false or misleading, the application may be declined. Information supplied will be checked by the school.

WITNESS DECLARATION (Concession card and application must be sighted and witnessed at attending school by a Department Officer)

I have sighted the claimant's card and confirm the details provided are correct.

School Officer

PRINT NAME OF WITNESS

WITNESS SIGNATURE

POSITION HELD

DATE

If the form is completed and dated prior to the start of Term 1 complete the commencement confirmation below (tick box and enter current date).

☐ I confirm that the above student(s) has/have commenced at this school Term 1, this school year

DATE: _____