



## **Indigenous Youth Leadership Program**

# Secondary education scholarship Parent/Guardian support & consent 2023

In administering the Indigenous Youth Leadership Program (IYLP), The Smith Family will need to collect personal information from you.

The Smith Family is committed to protecting the privacy and confidentiality of our clients and supporters. The Smith Family supports and is bound by the Privacy Amendment (Private Sector) Act 2000 and the National Privacy Principles. A copy of the National Privacy Principles can be found at <a href="http://www.privacy.gov.au/publications/npps01.html">http://www.privacy.gov.au/publications/npps01.html</a>.

#### Please note this is not a Sporting Scholarship

This form must be submitted with the Student Application and received by The Smith Family no later than 26th May 2023				
Student applicant details				
Please provide the following d	etails of the child who is apply	ing for a sc	holarship.	
Family name:	Given name(s):			
Date of birth:	Which school are they currently attending?			
Parent/Guardian details				
Please note our preferred met	hod of correspondence is ema	il, otherwis	e all mail will be sent	t to your postal address.
Parent/Guardian 1				
Family name:		Given name(s):		
Relationship to applicant (eg n	nother, father, guardian):			
Home address:				
Suburb/Community:			State:	Postcode:
Postal address (if different to all	nove):			
Suburb/Community:			State:	Postcode:
Home phone: Mobile phone:				
Work phone: Fax:				
Home email address:				
Work email address:				
Are you of Aboriginal and/or 1				
□ No □ Yes, Aboriginal □ Yes, Torres Strait Islander □ Yes, both Aboriginal and Torres Strait Islander				
Who are the traditional owne	rs of your home community?			
Do you speak a language othe	r than English?			
No Yes, Aboriginal English				
Yes, Aboriginal (please provide name of language)				
Yes, Torres Strait Islander (please provide name of language)				
Yes, other (please specify)				
Are you currently employed?				
☐ No ☐ Yes, full t	ime Yes, part time			

Parent/Guardian details (cont	)						
Parent/Guardian 2 (if ap	plicable)						
Family name:			Given na	me(s):			
Relationship to applicant	t (eg mother, father, g	guardian):					
Home address:							
Suburb/Community:				State:	Postcode	<u>:</u>	
Postal address (if differen	t to above):						
Suburb/Community:				State:	Postcode	2:	
Home phone:			Mobile p	hone:			
Work phone:			Fax:				
Home email address:							
Work email address:							
Are you of Aboriginal and	d/or Torres Strait Is	lander origin? P	lease select	one box from the lis	t below.		
☐ No ☐ Yes, Abo	original 🗌 Yes,	Torres Strait Isla	ander	Yes, both Aborigina	al and Tori	res Strait	Islander
Who are the traditional	owners of your hon	ne community?					
Do you speak a language	e other than English	1?					
No Yes, Abo	original English						
Yes, Aboriginal (pleas	se provide name of la	nguage)					
Yes, Torres Strait Isla	nder (please provide	name of languag	je)				
Yes, other (please spe	cify)						
Are you currently employ	ved?						
☐ No ☐ Yes,	full time	Yes, part time					
Other children in your	family						
If there are other children	n in your family, ple	ease tell us their	name and o	age, the name of thei	ir school ai	nd if they	have
ever received an IYLP sch	olarship.						
Family name	First name	A	Nge Nar	ne of school (if applical	ble)	IYLP scho	olarship?
1.						☐ No	Yes
2.						☐ No	Yes
3.						☐ No	Yes
4.						☐ No	☐ Yes
5.						☐ No	☐ Yes
6.						☐ No	☐ Yes
7.						☐ No	Yes
8.						☐ No	☐ Yes
Application process							
Applicants can only be se IYLP partner school (listed	-				_		
website at <u>www.thesmiti</u>	hfamily.com.au.						
Do you agree to this?		No	Yes				
Does your child agree with this decision? No Yes							
A requirement of the application process is that shortlisted applicants attend an interview with a parent or guardian. This interview is to establish whether or not the student meets the requirements set out in the Program guidelines.							
This interview is to establish	· · · · · · · · · · · · · · · · · · ·					_	

### Questions to support your child's application

In the following section please answer all of the questions to support your child's application.

1.	Why do you want your child to attend an IYLP partner school?
2.	How would you describe your child's personality?
3.	Please tell us about your child's hobbies, interests or talents.
4	In relation to leadership or at school what do you see as being your child's major achievements?
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### Questions to support your child's application (cont)

In the following section please answer all of the questions to support your child's application.

5.	How do you think your child will adapt to living away from home (if boarding)?
6.	How often will you be able to visit your child if they are at living away from home?
7	How will you support your child to complete year 12?
7.	now that you support your time to complete year 12.
8.	What educational goals do you have for your child (ie what do you want your child to get out of finishing year 12)?

# Questions to support your child's application (cont) In the following section please answer all of the questions to support your child's application.

9. If your child is successful, we need to be able to provide important that you tell us if your child has any medical special needs that we should know about?			
10. If you would like to make any further comments in suppextracurricular activities, special interests or certificates	port of your child's application (including information about s awarded) please make these below.		
Agreement and signature			
I/we confirm that the information in this form is true and complete, and understand and accept the conditions set out in the student application form. I/we give consent for our child to apply for an IYLP Secondary Education Scholarship and understand that they will be required to attend an approved IYLP partner school if selected.			
I authorise The Smith Family to disclose my personal inform Indigenous Australians Agency. I also authorise The Smith F relation to their application.			
Name:			
Signature:	Date:		
Name:			
Signature:	Date:		

If you have any questions about the Indigenous Youth Leadership Program or need help completing this form, please contact the IYLP Manager on (08) 8224 1402 or email IYLP@thesmithfamily.com.au.

This form must be submitted with the Student Application and sent by post or email (our preferred method is email).

The applicant will be notified when received.

#### APPLICATIONS AND SUPPORTING DOCUMENTS SHOULD BE SENT TO:

By post: Indigenous Youth Leadership Program Manager, PO Box 10500, Rundle Mall SA 5000
By email: IYLP@thesmithfamily.com.au