

Employee Family Study Discount Form

Employee Family Study Discount Form

| SECTION 1 - Student Information | | |
|---|---|----------------|
| 1.1 | Student name | Student number |
| 1.2 | Address | |
| | | |
| SECTION 2 - UNDA Program | | |
| 2.1 | Is this a UNDA First Degree or Diploma? First Degree Dip | loma |
| 2.2 | Commencement year | |
| | | |
| 2.3 | Name of related employee | |
| | | |
| 2.4 | Relationship to employee | |
| 2.7 | | |
| 2.5 | | |
| 2.5 | Employee school/division | |
| 0.6 | | |
| 2.6 | Commencement date of employee at UNDA | |
| | | |
| SECTION 3 - Acknowledgement | | |
| • | I have read the Policy: Employee Family Study Discount | |
| • | I confirm that I am a dependent child (as defined by the Policy) of an eligible UNDA employee | |
| • I understand that the discount will cease at the end of the semester, if I cease to be a dependent child of the UNDA employee, or the | | |
| employee associated with this discount ceases employment at the University | | |
| 3.1 | Student signature | Date |
| 3.1 | Student signature | Date |
| | | |
| 3.2 | Employee signature | Date |
| | | |
| | PEOPLE AND CULTURE USE | |
| | | |
| | Date application form received | |
| | Eligible for discount Not Eligible for discount | |
| | | |
| 6 | Signature Date | |

Please forward completed form with proof of relationship i.e. birth certificate via email to P&C@nd.edu.au no later than one month before the course commences.

