Catholic Education Office
Scholarship Reimbursement Form

(Date)
(Your Name)
(Postal Address)
(Postcode)
(Phone)
(Email)

Reimbursement for HECS costs incurred in study for: _________________________________

☐ Semester 1

☐ Semester 2

Certified as being correct by my school principal/business manager ________________

We DO NOT reimburse administration costs and/or student service fees.

______________________________________________________________

Please credit this scholarship amount to the account details provided below:

Bank:
Name of Account:
BSB:
Account Number:

Office Use Only

Date:

Approved by Head of Education Services:

______________________________________________________________

Send all documentation to:
Diana Batchelor
Administrative Officer
Tasmanian Catholic Education Office
PO Box 102, North Hobart TAS 7002
Fax: 03 62108844
Email: diana.batchelor@catholic.tas.edu.au