

Secondary Entrance Assessment (SEA) Award Application Form 2025

Please review Rules / Instructions before completing application form

MEMBER DATA		
FIRST NAME:	SURNAME:	ACC. #:
HOME ADDRESS:		
CONTACT:		
(C)	(H)	(EMAIL)
RELATIONSHIP TO CHILD:		ID #: (DP <input type="checkbox"/> ID <input type="checkbox"/> PP <input type="checkbox"/>)
BIRTH PARENT <input type="checkbox"/> ADOPTED PARENT <input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/>		
EMPLOYMENT DATA		
NAME OF EMPLOYER / BUSINESS NAME:		
EMPLOYMENT ADDRESS:		
OCCUPATION:	CONTACT #:	
	(W)	(EXT)
CHILD'S DATA		
FIRST NAME:	SURNAME:	
HOME ADDRESS:		
PRIMARY SCHOOL:		
DATE OF BIRTH:	SEA NUMBER:	
AWARD CATEGORY (PLEASE CHOOSE <u>ONLY</u> ONE)		
MERIT <input type="checkbox"/>	MERIT and NEED <input type="checkbox"/>	

MERIT and NEED APPLICANTS ONLY (SEE RULES B (i) AND B (ii))**MONTHLY INCOME: \$****BRIEFLY STATE WHY YOU SHOULD BE CONSIDERED FOR THE MERIT AND NEED AWARD:**

REQUIRED DOCUMENTS (PLEASE UPLOAD ALL REQUIRED DOCUMENTS WHERE APPLICABLE)**OFFICIAL STUDENT PERFORMANCE REPORT (Mandatory)**☐**COPY OF BIRTH CERTIFICATE (Mandatory)**☐**COPY OF BIRTH CERTIFICATE AFFIDAVIT (if applicable)**☐**ADOPTION ORDER (if applicable)**☐**PROOF OF LEGAL GUARDIANSHIP (if applicable)**☐**PROOF OF INCOME (Job Letter/Payslip if applicable)**☐

☐ I agree to comply with the rules for the RHAND SEA scholarship Awards.

☐ By submitting this document, I certify that the information contained in this Application Form is true and correct. I understand that if any information given in this application is found to be false or incorrect, this may disqualify my child from being considered for the award grant. Further, if any information is found to be false or incorrect after the granting of the Award, the Award is liable to be withdrawn.

☐ I hereby declare that all information provided in this form is true, accurate, and complete to the best of my knowledge and belief. I acknowledge that RHAND Credit Union will rely on this information to process my request. I further consent to the use of my electronic signature as a valid and legally binding expression of my agreement, in accordance with the Electronic Transactions Act, 2011.

☐ I acknowledge and agree that RHAND Credit Union will act on the information I have submitted electronically. I accept full responsibility for ensuring the accuracy and completeness of the information provided. I release RHAND Credit Union from any liability, claims, or damages arising from errors or omissions in the submitted information. I understand and consent that my electronic submission, including the checking of this box, constitutes my legal signature under the Electronic Transactions Act, 2011.

DATE: _____

**DEADLINE FOR SUBMISSION OF APPLICATIONS:
TUESDAY 29TH JULY 2025, 3:00 PM**