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)	(EMAI	L)						
RELATIONSHIP TO	CHILD:				ID #:	(DP □	ID 🗆	PP □)	
BIRTH PARENT	ADOPTED PARENT	LEGAL	RDIAN 🗆						
EMPLOYMENT DA	TA								
NAME OF EMPLOYER / BUSINESS NAME:									
EMPLOYMENT ADD	RESS:								
OCCUPATION:				CONTACT #:					
				(W)		(EXT)		
CHILD'S DATA									
FIRST NAME:			SURNAME:						
HOME ADDRESS:									
PRIMARY SCHOOL:	<u> </u>								
DATE OF BIRTH:			SEA NUMBER:						
AWARD CATEGORY (PLEASE CHOOSE ONLY ONE)									
MEDIT -									
MERIT			MERIT and NEED □						

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 DOCUMENT	S 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)							
\square I agree to comply with the rules for the RHAND SEA scholarship A	wards.						
□ By submitting this document, I certify that the information contant Application Form is true and correct. I understand that if any information is found to be false or incorrect, this may disqualify my considered for the award grant. Further, if any information is found incorrect after the granting of the Award, the Award is liable to be well as the factorial of the factor	ation given in this hild from being to be false or						
□ I hereby declare that all information provided in this form is true, complete to the best of my knowledge and belief. I acknowledge tha will rely on this information to process my request. I further consent electronic signature as a valid and legally binding expression of my a accordance with the Electronic Transactions Act, 2011.	accurate, and t RHAND Credit Union t to the use of my						
□ I acknowledge and agree that RHAND Credit Union will act on the submitted electronically. I accept full responsibility for ensuring the completeness of the information provided. I release RHAND Credit U claims, or damages arising from errors or omissions in the submitted understand and consent that my electronic submission, including the constitutes my legal signature under the Electronic Transactions Act	accuracy and nion from any liability, d information. I e checking of this box,						
DATE:							