Eligibility

* indicates a required field

Before you begin

Before completing this application form, ensure you have read the program guidelines. Incomplete applications received after the closing date will not be considered.

If you have any questions about these eligibility criteria, please contact the funder.

Scholarship privacy disclosure statement

Bendigo & Adelaide Bank Limited ABN 11 068 049 178 AFSL 237879The Bendigo Centre, Bendigo VIC 3550 PH 1300 304 541

1. Collection of your personal information

We, Bendigo and Adelaide Bank Limited and Community Enterprise Foundation Limited, collect your personal information to assess your application for a scholarship/grant and administer any scholarship/grant provided to you. If you provide incomplete or incorrect information we may be unable to assess your application.

1.Use and disclosure of your personal information

We treat your personal information as confidential and only disclose it to others where necessary. Your personal information is provided to the relevant scholarship/grant selection committee to assess your application.

Scholarship/grant selection committees may include any of the following parties:

- Chairman, nominated Directors and staff of Bendigo and Adelaide Bank Limited and/or its subsidiary companies
- Directors and staff of local Community Bank companies offering the scholarship
- Local citizens with special expertise (e.g. school principals)
- Staff from universities, secondary colleges or any organisation/club/group partnering with Bendigo and Adelaide Bank Limited to offer scholarships.

Your personal information may also be disclosed to related Bendigo and Adelaide Bank Group entities, our joint venture partners and Community Bank companies. Confidentiality is maintained at all times. If you have provided a referee to support your application, we may contact that referee and disclose relevant personal information contained in your application. If you are awarded a scholarship some of your personal information may be published on the Bendigo and Adelaide Bank Limited website. This information will include your full name, hometown, university name and course title.

1.Access to and correction of your personal information

In most cases you can gain access to and correct your personal information. Please contact us if you have an enquiry about your information:

Community Enterprise Foundation, PO Box 480, Bendigo, Vic 3552 Phone: 1300 304 541 OR Email: foundation@bendigobank.com.au

OR

Bendigo Bank, PO Box 480, Bendigo Vic 3552Phone: 1300 236 344 OR Email: contactus@bendigobank.com.au

1.Privacy Policy

You should also read our Privacy Policy. It contains information about:

- How to correct your personal information
- How to complain about a breach of the privacy laws by us and how we deal with a complaint
- Our disclosure of personal information to overseas entities, and where practicable, which countries those recipients are located in.

You can obtain a copy of the Privacy Policy from:

Bendigo and Adelaide Bank Limited at www.bendigobank.com.au/public/privacy-policy/full-privacy-policy

Bendigo Bank, PO Box 480, Bendigo Vic 3552Phone: 1300 236 344 OR Email: contactus@bendigobank.com.au

Community Enterprise Foundation™ at https://www.communityenterprisefoundation.com.au/policies/

Community Enterprise Foundation, PO Box 48, Bendigo, Vic 3552 Phone: 1300 304 541 OR Email: foundation@bendigobank.com.au

Rural Bank at https://www.ruralbank.com.au/policies/

Rural Bank, PO Box 3660, Rundle Mall, SA 5000Email: service@ruralbank.com.au

Community Enterprise Charitable Fund ABN 12 102 649 968 (the Fund), The Bendigo Centre, Bendigo VIC 3550

Sandhurst Trustees Limited ABN 16 004 030 737, AFSL 237906, a subsidiary of Bendigo and Adelaide Bank Limited ABN 11 068 049 178, AFSL 237879, is the trustee of the Fund.

Rural Bank Limited ABN 74 083 938 416, AFSL 238042, Grenfell Street, Adelaide SA 5000

Privacy notice

Bendigo Bank will respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the Privacy Act 1988 and amended by the Privacy Amendment (Enhancing Privacy Protection) Act 2012. Please view our privacy statement here.

Acceptance

Do you agree to the scholarship privacy disclosure statement? * Do you consent to the collection of your sensitive information? * | lagree | loonsent

Contact details

* indicates a required field

Applicant information

Applicant * First Name	Last Name	
Address * Address		
Is this address locat ○ Yes	ed within the area	a specified in the program criteria? No
Eligible address * Address		
(eg. family home, or scho	ol address - demonstra	ate your connection to our community)
Phone number *		
Must be an Australian ph	one number.	
Email address *		
Must be an email address	· .	
Gender * ○ Male ○ Female ○ Gender diverse ○ Prefer not to respon	nd	
Do you identify with A carer for a family Person from cultura Person with a disab A member of the Lo None of the above	member (e.g. sibling ally and linguistically bility GBTQIA+ community	gs, parent, guardian) diverse background

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Are you an Australian citizen or permanent resident? *

○ Yes		○ No			
Do you identify as A ○ Yes	boriginal and/or Tor	res Stra	nit Islar	nder? *	
Optional: please upl and Torres Strait Isl Attach a file:		on of ide	entity ·	· Verificati	on for Aboriginal
Age confirmation					
Month of birth *	Year of birth *			As of today, are * • Yes	e you 18 years of age or older?
Secondary contac	ct				
* First Name	Last Name				
Phone number *					
Must be an Australian ph	one number.				
Email *					
Relationship to appl	licant *				
Parent/guardian					
* First Name	Last Name				
Phone number *					
Must be an Australian ph	one number.				

Email *

Please note: Should this applica student's email address so ple to print and sign a component of	ease ensure it is a	ctively monitored	greement will be sent to the I. As parent/guardian, you will need
Relationship to applicant *	«		
What type of scholarship a University TAFE Secondary School Primary School Other (only select if instru		ng for? *	
How did you hear about the Local Community Bank		? *	 Friend or family member
branch ○ Bendigo Bank website ○ Bendigo Bank branch	Careers advLocal adver		Good Universities GuideCommunity Enterprise
○ School	○ Social medi	ia	Foundation Other:
Name of program/course y	ou are/will be	undertaking.	*
Are you from a single income family? * ○ Yes ○ No		Do you (or your guard Card? * ○ Yes	dian) have a Health Care Card or a Concession O No
Please select your type of employment * Full time Part time Casual hours Not currently working		Are you the first pers pursue a higher educ Yes	son in your immediate or extended family to cation? * ○ No
Education and achiev	vements		
* indicates a required field			
History/background			
Current or last educationa	l institution at	ttended *	

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Educational institution location *

Address			
Suburb/Town, State/Province, ar	nd Postcode are re	quired.	
Highest level of education attained *		What year was this? *	
If you have not received y a later date.	our score yet,	you can save your app	lication and complete at
If you have never received a	rank, select 'Oth	er' and put '0' as your	rank score.
Rank Type * O ATAR O OP O IB	Other:	Rank Score *	
		Must be a number.	
Have you studied at University before? * ○ Yes ○ No		Have you studied at TAFE before	e? * ○ No
About you			
Tell us about yourself. *			
Word count: Must be no more than 250 word:	S.		
Describe your achievement roles to support your app		n your community ar	nd any leadership
Toles to support your upp	neution.		
Word count: Must be no more than 150 word:	s.		
Leadership roles			
Example 1			
Word count: Must be no more than 15 words.			
Example 2			
Word count:			

Must be no more than 15	words.		
Example 3			
Word count: Must be no more than 15	words.		
Example 4			
Word count: Must be no more than 15	words.		
Tell us about your fu	uture study and care	eer aspirations. *	
·	j	·	
Word count: Must be no more than 30	0 words.		
Describe the challen during your education study. *			
Word count: Must be no more than 25	0 words.		
Please share other o	shallongos vou havo	faced during your o	ducation
riease silare other C	ilalieliges you liave	raceu during your e	uucation.
Word count: Must be no more than 25	0 words.		
Referee details			
This person is not relat knows you.	ed to you; it could be	a teacher, a person in t	the community who
Please ensure you hav if your application prog		of your application, as	they may be contacted
Referee * First Name	Last Name		
i ii se ivaiii e	Lust Nume		
Phone number *			

Must be an Australian phone number.	
Email *	
Relationship to applicant *	
to applicant	
Future education details	
* indicates a required field	
Course provider/educational institution *	
Name of primary/secondary school/other	aducation provider *
Name of primary/secondary school/other	education provider
School/campus location *	
Address	
Suburb/Town, State/Province, and Postcode are req	uired.
What type of course are you undertaking	
what type of course are you undertaking	•
Field of study *	
Name of course *	
If you are in primary or secondary school, please wr	rite the year you are going into.
Second subject field of study (double deg	jree) *

Name of course (do	uble degree) *		
Planned course duration *		Years / months / weeks *	
Must be a number.			
Study schedule * O Full time	○ Part time		
Month your course begins *		Year your course begins *	
Will you have to rel	ocate or move out of	home to undertake y	our studies? *
Will you be studying	g on/off campus *		

Financials and supporting documents

* indicates a required field

Course costs

What expenses will you incur for your study over the next 12-months and approximately how much will each cost?

E.g. Accommodation costs, course costs (excluding HELP), study-related materials/ equipment, textbooks, tutoring and/or education related travel (within Australia).

Click the 'Add more' button to add rows.

Category	Cost (\$)
	Must be a dollar amount.
	\$

Income

What do you estimate your income will be over the next 12 months?

Source of Income	Amount (\$)
e.g. part time job, Services Australia allowances, student payments.	Must be a dollar amount.
student payments.	
	\$

towards your education? *	er funding (including other scholarships)
○ Yes	○ No
Applied for/confirmed funding	Value (#)
Applied for/confirmed funding other grants / bursaries / gifts / scholarships	Value (\$) Must be a dollar amount.
	\$
Mandatory supporting documentat	ion
Please note, you can save your application ar documents at a later date.	nd return to upload the following required
Letter of offer (from the institution you a Attach a file:	are applying to) *
Proof of score (your most recent academ Attach a file:	nic score to support your application) *
Optional supporting documentation	1
The following support documents are optiona • Referee letter • Images (e.g. to show your community inv • Other supporting documents	
Attach a file:	
More than one file can be uploaded.	
Supporting documentation	
Please feel free to upload any of the following • Referee letter • Images • Other supporting documents	documents to support your application:
Attach a file:	
More than one file can be uploaded.	

Certification

* indicates a required field

This section must be completed by an appropriately authorised person; this needs to be the parent/guardian listed in this application if the applicant is aged under 18.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if this scholarship is approved, we will be required to accept the terms and conditions in the scholarship agreement.

Certification *

○ I agree