*Complete this form and submit it, with supporting documentation to the HDR Team Leader (Amy Stansfield a.stansfield@unsw.edu.au)*

**Applicant Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Given Name(s): |  | Surname: |  |
| Student ID: |  | School or Centre: |  |

**Claim Details**

I require emergency hardship funds to cover expenses associated with:

[ ]  Unexpected health costs

[ ]  Unexpected necessity to relocate (rental accommodation, domestic matters)

[ ]  Unexpected caring responsibilities / costs

[ ]  Unexpected loss of income

[ ]  Unexpected reasonable and necessary other one-off costs, for example, urgent domestic repairs, etc.

|  |
| --- |
| Please provide a brief statement describing your circumstances and the costs involved (100 words) |
|  |

Please provide details of the expenses which you are applying for under this fund

|  |  |
| --- | --- |
| **Item Description** | **Cost AUD** |
|  |  |
|  |  |
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|  |  |
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|  |  |
|  |  |
|  |  |
| Total |  |

**Applicant Declaration:**

[ ] I declare that I am currently enrolled in a higher Degree Research Program in the Arts & Social Sciences

[ ] I declare that I am on track for timely completion (within 4 years FTE for PhD or 2 years FTE for MARes)

[ ] I declare that I have not applied for funding for this cause previously (or I have provided further information below)

[ ] I have provided copies of bills/receipts/correspondence or other evidence of the costs I wish to claim under this fund

|  |
| --- |
| Further information (if required) |
|  |

|  |  |
| --- | --- |
| Applicant Signature |  |
| Date |  |

**Supervisor’s Declaration**

[ ] I declare that that the student meets the eligibility criteria for this funding scheme

|  |
| --- |
| Please provide any additional comments in support of this application |

|  |  |
| --- | --- |
| Supervisor Name |  |
| Supervisor Signature |  |
| Date |  |

**Postgraduate Coordinator Approval**

|  |  |
| --- | --- |
| Supervisor Name |  |
| Supervisor Signature |  |
| Date |  |