

VIT REGISTRATION No:

VICTORIAN INSTITUTE OF TEACHING

Application for Waiver – Active Registration

Significant financial hardship
Please complete this form setting out your financial circumstances so that the Institute can assess whether you qualify for waiver of the annual registration fee due to significant financial hardship.

BEFORE COMPLETING THE FORM, PLEASE READ THE GUIDELINES
ALL SECTIONS MUST BE COMPLETED.

Personal details
Surname, Title Mr/ Mrs/ Ms/ Miss (please circle), First name, Other name, Expiry Date of current registration, Address (include postcode), Telephone Number: Home, Mobile, Work, Email address

Reasons for seeking waiver of the annual registration fee
For example: Not working full time because of serious illness or caring for a family member.
Please provide evidence eg medical certificates, report from Doctor.
What is the time period for which you seek this waiver: Commencing ___ / ___ / ___ to ___ / ___ / ___

If you return to full time work you must advise the Institute immediately.

Partner/Dependent details		
Partner		
Surname.....	First name.....	
Dependent children...		
Surname.....	First name.....	Age.....
Surname.....	First name.....	Age.....
Surname.....	First name.....	Age.....
Surname.....	First name.....	Age.....
Other dependents		
Surname.....	First name.....	Age.....
Surname.....	First name.....	Age.....
Surname.....	First name.....	Age.....

Income Per week	You (\$)	Partner (\$)
Earned gross income		
Investment income		
Rental income		
Pension/Benefit/Family allowance (including insurance, superannuation and Centre link payments)		
Income of children		
Other income		

Expenses Per week	You (\$)	Partner (\$)
Food		
Rent		
Transport		
Gas		
Electricity		
Water		
Clothing		
Petrol		
Child support payments		
Other		
Per Year		
Rates		
School fees		
School expenses		
Insurance		
Car registration		
Other		

Asset (value)	You (\$)	Partner (\$)
Family home		
Car		
Other property		
Other		

Liabilities - You	Amount owed (\$)	Monthly repayment (\$)
Mortgage		
Loans		
Credit card		
Other		

Liabilities - Partner	Amount owed (\$)	Monthly repayment (\$)
Mortgage		
Loans		
Credit card		
Other		

Other Expenses (eg medical expenses, car accident, replace refrigerator etc.)

Explanation (If you do not have enough space, attach another page).	Amount (\$)

DECLARATION
I declare that the above statements and account of my financial circumstances are true and correct.
Signature.....Date.....

This form must be sent to:

**Victorian Institute of Teaching
PO Box 531
Collins Street West Vic 8007**

VIT REGISTRATION No:

SUMMARY GUIDELINES FOR THE WAIVER OF THE ANNUAL REGISTRATION FEE

Active Registration

Requests for waiver of the fee in cases of extreme financial hardship must be accompanied by full reasons for the request, including why the person cannot earn sufficient income, and documentation that the person is in receipt of no more than a minimal income and few assets that could not easily be liquidated.

Financial hardship only applies in specific circumstances. These may include receipt of a Social Security benefit, though this is not of itself proof of financial hardship. Examples of extreme financial hardship would be

- A person undergoing treatment for a serious medical condition with limited income who intends to return to work as a teacher when the treatment finishes.
- A person on limited income caring for a chronically ill member of the family, but who does occasional emergency teaching.

The Institute will consider applications for waiver (active registration) in whole or in part, of the annual registration fee where a registered teacher wishes to continue to work as a teacher/principal in a Victorian school during the year of registration but is experiencing significant financial hardship.

The Institute will consider such applications on a case by case basis. Waiver of the annual registration fee will in such cases enable the teacher to continue to work as a teacher/principal in a Victorian school, maintaining an active registration status for that year and being issued with a registration card.

To apply for waiver of the annual registration fee in these circumstances, complete the form **Application for Waiver – Active Registration**. Please provide the evidence indicated on the form to support your application.

Applicants will be notified as quickly possible of the outcome of their application.