



St Thomas' Primary School

Western Australia Oaths, Affidavits and Statutory Declarations Act 2005

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## Statutory Declaration

I, \_\_\_\_\_

\_\_\_\_\_  
(Name, address and occupation of person making declaration)

sincerely declare as follows:

1. This statutory declaration relates to an application for \_\_\_\_\_ (child's full name) ("the child") to receive a scholarship to attend St Thomas' Primary School.
2. I am a parent of the child or person with responsibility for the child.
3. The estimated assets, liabilities and income of the child's parents are as set out in the document attached and marked "A" ("attachment A").
4. Other facts that I consider relevant to the financial position of the child or her/his parents are recorded in attachment A.
5. To the best of my knowledge, the contents of attachment A are true.

This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

This declaration is made under the *Oaths, Affidavits and Statutory Declarations Act 2005*

at \_\_\_\_\_ on \_\_\_\_\_  
(Place) (Date)

in the presence of \_\_\_\_\_  
(Signature of authorised witness')

\_\_\_\_\_  
(Name of authorised witness and qualification as such a witness)

by \_\_\_\_\_  
(Signature of person making the declaration)

## Important

This declaration must be made before any of the following persons:

Academic (post-secondary institution)	Loss adjuster
Accountant	Marriage Celebrant
Architect	Member of Parliament (State or Commonwealth)
Australian Consular Officer	Minister of religion
Australian Diplomatic Officer	Nurse
Bailiff	Optometrist
Bank Manager	Patent Attorney
Chartered secretary	Physiotherapist
Chemist	Podiatrist
Chiropractor	Police officer
Company auditor or liquidator	Post Office manager
Court officer (Judge, magistrate, registrar or clerk)	Psychologist
Defence Force officer (Commissioned, Warrant or NCO (with 5 years continuous service))	Public Notary
Dentist	Public Servant (State or Commonwealth)
Doctor	Real Estate agent
Electorate Officer (State – WA only)	Settlement agent
Engineer	Sheriff or deputy
Industrial organisation secretary Insurance broker	Sheriff Surveyor
Justice of the Peace (any State)	Teacher
Lawyer	Tribunal officer
Local government CEO or deputy CEO	Veterinary surgeon
Local government councillor	Any person before whom, under the Statutory Declarations Act 1959 of the Commonwealth, a Statutory Declaration may be made.

## Important Information

Any authorised witness for the state of Western Australia may also witness a Commonwealth Statutory Declaration, as long as he or she is in Western Australia at the time of witnessing (Schedule 2, item 231 of the Commonwealth Statutory Declarations Regulations 1993).

As of 1 January 2006, there is no provision for commissioners for declarations in the state of Western Australia.

# Summary of Financial Circumstances of Person(s) Responsible for the Child

# A

For this document, "parent" includes an adoptive parent

- Unless the child receives a scholarship, it will not be possible for him to attend the school in the foreseeable future.
- I am not a parent of the child. I have responsibility for him because

Complete the following only if you are a parent of the child.

- I am a parent of the child. I estimate that the total combined annual taxable income of the child's parents is \$ \_\_\_\_\_
- Taking into account all assets of any kind, including without limitation trusts of which either parent is appointor (or otherwise has control), real estate, shares, motor vehicles, boats and all items held on a parent's behalf by any other person/s, the estimated values of assets and liabilities of the child's parents are as set out below:

Item <small>(Briefly describe each item. Headings are suggestions.)</small>	Estimated value of interest in the item
<b>Assets</b>	
Real estate	
Motor vehicles	
Shares	
Household contents	
Investments	
Other assets	
<b>Liabilities</b>	
Loans secured by a mortgage	
Other loans	
Credit cards	
Other liabilities	

This is the attachment marked "A" referred to in the annexed declaration of \_\_\_\_\_  
(Name of person making declaration)

made before me this \_\_\_\_\_ of \_\_\_\_\_  
(Day) (Date)

Name of Authorised Witness \_\_\_\_\_

Qualification of Authorised Witness \_\_\_\_\_

Signature of Authorised Witness \_\_\_\_\_