



SHOW CAUSE FOR UNDERGRADUATE SCHOLARSHIP

Please complete this form and return it to Scholarships Office. Please print clearly.

Student No.: _____ Title: _____ Surname: _____ Other Names: _____

Address for correspondence: _____
 _____ Suburb: _____ P/Code: _____

Telephone number/s: _____ Usyd E-mail: _____

Faculty: _____ Degree: _____

Name of Scholarship/s: _____

Attach an A4 typed sheet stating the reasons and or circumstances you feel have led to your low AAM last semester. If you have engaged with professional services please attach supporting documentation e.g. letter from the University of Sydney's Counselling Service/Disability Service/Doctor's certificate. If you cannot provide any documents that give evidence of ongoing consultation please complete a Statutory Declaration.

Please state the action in your statement you have taken to address the circumstances outlined above in order to improve marks in the future eg Study Plan/change in work circumstances/support from family/change in subjects etc.

Signed (Scholarship holder): _____ Date: ____/____/____

Office use only:

I recommend continuation / discontinuation of the scholarship subject to meeting the following condition(s):

Student must achieve an AAM of _____ in semester _____

Signed : _____ Date: ____/____/____

Start Date: _____ Entered into Flexsis: _____ Reason: _____

AAM: S1, 2008: _____ S2, 2008: _____ S1, 2009: _____ S2, 2009: _____ S1, 2010: _____

HOS/ DVC Approval: _____ Letter to Student: _____