Bundesgymnasium GIBS z.H. Parent Association Georgigasse 85 8020 Graz



Financial Student Support by the Parent Association Guidelines

The GIBS Parent Association provides assistance to families so that every student can participate in school events (e.g., ski trips, sports weeks, language trips) or make school-related expenses. The level of support depends on the cost of the school event and the family's net income. Please fill out the application form completely and submit it along with the required documents. All information you provide will be treated confidentially and used solely for decision-making purposes (in accordance with GDPR).

Requirements

- Membership in the GIBS Parent Association by paying the annual membership fee (included in the contribution to the support association).
- Fully completed application form.
- Financial need. You can use the School Aid Calculator as a reference.

Deadlines

• The application must be submitted to the GIBS Parent Association in a timely manner (at least 4 weeks before the school event). In exceptional cases, support may be granted afterward.

Prozess

- A separate application must be completed for each school event.
- You can send the completed application online to the Parent Association at ev.support@gibs.at.
- If the requested amount exceeds 300 Euros, please also provide proof of family income, such as pay stubs, tax returns, or bank statements.
- The relevant Parent Association committee will review the application and attachments as quickly as possible. The decision will be communicated to you by email.

Disclaimers and Notes

- There is no legal entitlement to financial support.
- The amount of financial support depends on the family's financial need and the available funds in the Parent Association.
- In cases of temporary need, parents can offer to repay the received financial support. Such offers can be noted on the form but are entirely voluntary.
- The GIBS Parent Association reserves the right to reclaim support in case of incorrect information, nonparticipation in an event, or overpaid subsidies.

If you have any questions, please feel free to contact us via email at ev.support@gibs.at.

Your GIBS Parent Association

<u>Netto</u> einkommen monatlich (EURO)		Anzahl der im Haushalt lebenden personen					
von	bis	2	3	4	5	6	
0	1600	90%	90%	90%	90%	90%	
1601	1800	80%	90%	90%	90%	90%	
1801	2000	70%	80%	90%	90%	90%	
2001	2200	60%	70%	80%	90%	90%	
2201	2400	50%	60%	70%	80%	90%	
2401	2600	40%	50%	60%	70%	80%	
2601	2800	30%	40%	50%	60%	70%	
2801	3000	20%	30%	40%	50%	60%	
3001	3200	0%	20%	30%	40%	50%	
3201	3400	0%	0%	20%	30%	40%	
3401	3600	0%	0%	0%	20%	30%	
3601	3800	0%	0%	0%	0%	20%	

Die Familien werden gebeten, auch an anderen Stellen Anträge auf Unterstützung zu stellen (Ansprechperson ist immer die leitende Lehrperson der Veranstaltung)

The table primarily serves the Parent Association in the decision-making process. In cases of financial hardship, the Parent Association reserves the right to make decisions regarding financial support that may deviate from the above table.

Bundesgymnasium GIBS z.H. Elternverein Georgigasse 85 8020 Graz



Financial Student Support by the Parent Association Application Form

1. Applicant (Parent/Guardian)							
Last Name:							
First Name:							
Address:							
Postal Code and City:							
Email:							
Phone/ Mobile:							
Band Account Details:							
IBAN:							
2. Student							
Last Name:							
First Name:							
Class: Class Teacher:							
3. School Event:							
Event Name:							
Date or Period oft he Event: at // from to							
Event Cost:	Euro						
Teacher's Neme (Organization):							
4. Financial Support:							
Amount of support requested: Euro							
(Please attach proof of family income if the amount exceeds 300 Euro)							
Reasons for requesting support:							
Family Net Income including all additional incomes per month:	Furo						
Family Net Income including all additional incomes per month:	Euro						
Family Net Income including all additional incomes per month:	Euro						
Family Net Income including all additional incomes per month:	Euro						
Number of individuals/children in the household requiring support:							

□ This is a request for temporary financial assistance. I intend to repay the amount of _____ Euro by _____ (Date) to the Gibs Parent Association.

 \Box I hereby confirm that the provided information is true, and the requested financial support will be used exclusively for the described school event.

□ I consent to the Gibs Parent Association using my personal data for processing financial assistance and retaining it for tax and financial auditing purposes.

Place, Date

Signature of the Applicant (Parent/Guardian)

To be filled out by the Vom Elternverein genehmigt:	Parent □Ja	Association:	
			Freigabe, Datum, Unterschrift
Mitgliedschaft im EV geprüft: Betrag überwiesen:	□Ja □Ja	□Nein □Nein	
			Freigabe , Datum, Unterschrift
Höhe des Betrages:	Euro		