Bundesgymnasium GIBS z.H. GIBS Foundation Georgigasse 85 8020 Graz







Guidelines for Obtaining Financial Support from the GIBS Foundation

The GIBS Foundation 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. Support applications are adjudicated by the Parents' Association. The level of support depends on 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 Foundation by paying the annual membership fee.
- Fully completed application form.
- Financial need. Please use the School Aid Calculator as a reference.

Deadlines

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

Process

- A separate application must be completed for each school event.
- Please send the completed application online to the Parents' 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 Parents' 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 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 Parents' 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.

Funding Tiers Based on Monthly Income and Household Size:

Net monthly income		Number of people living in the household					
von	bis	2	3	4	5	6	
0€	1,760€	90%	90%	90%	90%	90%	
1,761 €	1,980€	80%	90%	90%	90%	90%	
1,981 €	2,200 €	70%	80%	90%	90%	90%	
2,201 €	2,420 €	60%	70%	80%	90%	90%	
2,421 €	2,640 €	50%	60%	70%	80%	90%	
2,641 €	2,860 €	40%	50%	60%	70%	80%	
2,861 €	3,080 €	30%	40%	50%	60%	70%	
3,081 €	3,300 €	20%	30%	40%	50%	60%	
3,301 €	3,520 €	0%	20%	30%	40%	50%	
3,521 €	3,740 €	0%	0%	20%	30%	40%	
3,741 €	3,960 €	0%	0%	0%	20%	30%	
3,961 €	4,180 €	0%	0%	0%	0%	20%	
milies are asked to also apply for support from other sources. e contact person is always the lead teacher for the event.						Stand: 09/202	

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

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GIBS Foundation Financial Support 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 of the Event: at // from to					
Event Cost:	Euro				
Teacher's Name (Organization):					
4. Financial Support:					
Amount of support requested: Eur					
(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				
Number of individuals/children in the household requiring support:					
Transer of marriadals/emiliferi in the household requiring support.					
Support already requested from the Department of Education or other Organization:					
Organization Name: Amount Granted:	Euro				

☐ This is a request for temporary financial assistance. I intend to repay the amount of Euro by (Date) to the GIBS Foundation.							
☐ I hereby confirm that exclusively for the descr	-		nation is true, and the requested financial support will be used				
			n and GIBS Foundation using my personal data for processing nd financial auditing purposes.				
Place, Date			Signature of the Applicant (Parent/Guardian)				
To be filled out by the			1:				
Vom Elternverein genehmigt:	∐Ja	∐Nein	Freigabe , Datum, Unterschrift				
Mitgliedschaft im EV geprüft:	□Ja	\square Nein					
Betrag überwiesen:	□Ja	\square Nein					
			Freigabe , Datum, Unterschrift				
Höhe des Betrages:	Euro _		-				