

**SUPPLEMENTARY ACADEMIC SUPPORT (SAS)
RULES & GUIDELINES**

Australia Awards are prestigious scholarships funded by the Australian Government. As part of the scholarships entitlements, a limited amount of **supplementary academic support** funding is available where the institution, awardee or Program Area identifies that assistance is required in line with the institution's academic requirements.

The University of Sydney's **International Sponsorships Unit** administers SAS on behalf of its AAS students, ensuring equity, transparency and good use of public money.

SAS can be used by AAS students, by seeking the International Sponsorships' written approval, once all University and Faculty support mechanisms have been exhausted. By submitting this form and requesting access to access the Supplementary Academic Support Entitlement, students acknowledge they have [reviewed the Scholarship policy](#).

AAS students should not incur any expenses prior to the written approval of the International Sponsorships Unit, or they may not be reimbursed.

ACADEMIC STAFF	By providing your signature you recommend and endorse the use of the listed tutor for supplementary academic support and confirm that you have no issue with the student receiving private tutoring. To the best of your knowledge the student has engaged in all free of charge university support mechanisms and should now proceed with requesting Supplementary Academic Support.
IMPORTANT PLEASE NOTE	The above is an abbreviated version of SAS Rules and Guidelines, Australia Awards scholars should consult the current scholarship handbook for current policy guidelines here . International Sponsorships reserves the right to administer SAS on a case-by-case basis, at its own discretion, and in line with the University's contract with DFAT.
CONTACT	International Sponsorships, Lvl 4 JFR Bldg G02, PH: 02 8627 5449 australiaawards@sydney.edu.au

**TUTORIAL ASSISTANCE
SUPPLEMENTARY ACADEMIC SUPPORT (SAS) APPLICATION FORM**

STUDENT FULL NAME:	SID:
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UNIT DETAILS	TUTOR DETAILS
UNIT NAME:	FULL NAME:
UNIT CODE:	STAFF/STUDENT ID (IF APPLICABLE):
ESTIMATED HOURS REQUIRED (MAX.5)	EMAIL:

STUDENT SIGNATURE: _____ **DATE:** _____

By requesting to access my Supplementary Academic Support Entitlement, I acknowledge that I have [reviewed the Scholarship policy](#), and sought all relevant academic support services available through the University, my faculty and my teachers.

ACADEMIC STAFF/SUPERVISOR SIGNATURE: _____ **DATE:** _____

ACADEMIC STAFF/SUPERVISOR NAME: _____

By providing my signature I recommend and endorse the use of the listed tutor for supplementary academic support.