



LEXSA CHILDCARE ASSISTANCE REBATE FORM 2025

STUDENT NAME:

STUDENT NUMBER: LEXSA MEMBER: YES/NO

COURSE ENROLLED: **ON CAMPUS/ONLINE**

ADDRESS:

PHONE CONTACT:

STUDENT EMAIL:

CHILDCARE PROVIDER:

STUDENT BANK DETAILS:

ACCOUNT NAME:

BSB:ACCOUNT NUMBER:.....

Please attach Invoice from your provider & drop into the LEXSA Office or email to Debra at debra.johnston@lexsa.com.au

Reimbursement will be up to \$25 per week for current LEXSA Members who are currently enrolled and studying at **Southern Cross University for 2025**

This service has been funded by the Student Services Amenities Fund (SSAF)