

Tuition Assistance Application

Date Applied:	Date	Date: Approved		_Denied	
Child's Name:					
Firs	st	Middle		Last	
Student is entering w	hat grade:				
Parent's Names:					
Are both parents in the	he home?:				
Legal Guardians (if or	her than parents)				
List Relationship if C	Guardians				
Mailing Address:					
Home Phone:	Work Phone:		Cell Phone: _		
Does your child have	e siblings?	Name	es and Ages:		
	,		,		
Household Income:	\$15,000 - \$20,00 \$21,000 - \$25,00 \$26,000 - \$30,000 \$31,000 - \$35,000	0	\$36,000 - \$40,000 \$41,000 - \$45,000 \$46,000 - \$50,000 \$51,000 - \$55,000 \$56,000 plus		
Please explain your v	view of Christian ed	lucation:			
What are your expec	tations of our school	1?			

Any additional comments:					
Last year's income (12months; JanDec.)					
Current year income (12 months: Jan. – Dec.)					
Next year's projected income (12 months: Jan. – Dec.)					
Child support (yes/no)How much?:					
If a single parent, does your ex-spouse support Christian education?					
Do you receive adoption and or foster care assistance?					
If so, how much annually?					
If so, is this included in the amount you listed as household income?					

Please provide a list of your child's transcripts from their current school (if applicable) when submitting this application and a copy of your last W2's.