

Student Financial Aid Program~Scholarship Assistance Request Form

The Financial Aid Program provides opportunity for a Christian School education for those who would otherwise not be able to afford the full cost of tuition. Aid is based on income-related need, with specific amounts determined by the total funds available for the year. These funds are not a separate account but are an operating loss in the school budget.

Because the financial aid program is a needs-based program, and because of limited available funds, those applying must supply accurate family income information. Any family in need is invited to apply. To apply for financial aid, you must submit this Scholarship Assistance Request Form in its entirety along with a copy of your most recent tax returns. The information submitted will be kept confidential and be reviewed by the Scholarship Assistance Committee.

Qualification for application:

(PLEASE, DO NOT submit an application if you do not meet BOTH of the qualifications listed)

Please note your completed application does NOT guarantee that you will be granted scholarship aid.

- Grade qualification (Readiness, Kindergarten, and Grades 1-8)
- Income level under \$35,000 (1 child)/\$40,000 (2 children)/\$45,000 (3 children)

(Full-time Christian ministries families will be given special consideration)

Date of Application: _____

Aid Requested for the School Year: 20__ - 20__

Tuition Fee Schedule for School Year Noted Above:

Tuition Fee: \$ _____

Application Fee(s): \$ _____

Registration Fee(s): \$ _____

Curr./Operating Supply Fee(s) \$ _____

Activity Fee(s) \$ _____

Total: \$ _____

For Office Use Only:

Application Rec'd: _____
 Scholarship % Granted: _____
 Payment Plan Granted: _____
 Request Denied Due To: _____
 Reviewed by: _____

Parents Names:

Residence Information:

Street: _____

City/St/Zip _____

Phone #: _____

Family Member Information:

<u>Name of all Dependent Child(ren):</u>	<u>Age:</u>	<u>Grade Level</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Father's Name: _____
 Occupation: _____
 Social Security #: _____

Mother's Name: _____
 Occupation: _____
 Social Security #: _____

Have you ever applied for or received financial aid from Open Door Christian Academy in the past?

Yes No If yes, when? _____ How much? _____

Will anyone else be helping you with tuition? To what extent? Please be specific: _____

Family Name: _____

Please read each of the statements below and fill in all requested information:

Please use additional sheets if necessary.

Annual gross family income \$ _____
Monthly gross family income \$ _____
Do you own or rent your home? _____
What is the current market value of your home? \$ _____
How much is your monthly mortgage or rent payment? \$ _____
How much money do you have combined in bank, Savings & Loan,
Credit Union, Checking Accounts, etc. \$ _____
Do you own any other property other than your current residence? _____
If so what is the value of that property? \$ _____
Is there any money owed to you that you anticipate collecting? _____
If so when will you collect it and how much? \$ _____
Do you have any other assets, investments, businesses, etc? _____
If so what are they worth? \$ _____
Do you receive any child support/social security benefits? If so, how much? \$ _____
Do you have reason to believe your financial status will change during the
course of this school year? If yes, explain. _____

What make/year vehicle(s) do you have? How many? Own/lease/finance-monthly payments

What other financial obligations do you have budgeted each month? _____

Please express your personal commitment to tithing. _____

If you and/or your spouse is currently unemployed, are you actively seeking employment?
If so how? _____

Please feel free to explain any extenuating circumstances or financial needs that you feel the Scholarship
Committee should consider on your behalf:

As believers in Christ as Lord and Savior and desiring Open Door Christian Academy to work with us in the total
Christian education of our child(ren), we have requested financial assistance to enable us to enroll our child(ren)
in Open Door Christian Academy for the school year noted on this form.

We have read and agree with the Statement of Faith Policy and the School Student Handbook and Parent
Handbook. If the Lord supplies our needs after Financial Assistance is granted, we will notify the school business
office and have the assistance lowered or rescinded. In addition, by signing this form I am (we are) also agreeing
to perform the assigned work project to help paint, repair, and/or clean the facility by the agreed date for the
coming year. I (We) understand that failure to comply with these requirements may result in loss of Financial
Assistance. I (We) understand that the children benefiting from this assistance are expected to cooperate
fully with the policies set forth by Open Door Christian Academy.

By signing below we agree to the terms/conditions within this form. We also agree that the information within
this application is true and accurate as stated. We also understand that we are not guaranteed to receive
Scholarship Assistance.

Father's Signature Date

Mother's Signature Date

Family Name: _____

Families granted Financial Assistance are required to assist in the operation of the school's programs. In consideration of your application for Financial Assistance, please complete the following form, listing your interests and/or preferences for service (1st, 2nd, 3rd choices, etc). Please feel free to expand on any special ability related to the items listed below or to comment on other areas of service and expertise you may have from which ODCA could benefit.

What days/times are you available to assist in a work assignment?

Days: _____

Times: _____

Fund Raising Event: All scholarship families are asked to participate in our fund raisers. By this we mean to find people to contribute toward the fund raising product/service. For example, find sponsors for your children for the Race for Education.

Work Projects: All scholarship families are asked to participate in at least one work project scheduled and assigned by ODCA.

Buildings/Grounds:

- ___ Carpentry
- ___ Cleaning-general
- ___ Cleaning-windows
- ___ Electrical
- ___ Masonry
- ___ Painting
- ___ Snow Removal
- ___ Tile Work
- ___ Yard Work

Teacher Assistance

- ___ Foreign Language Aide
- ___ Foreign Language Teacher
- ___ Hot Lunch Helper
- ___ Library Helper
- ___ Lunch Duty (classroom)
- ___ Nursing
- ___ Recess/Playground
- ___ Substitute Aide
- ___ Substitute Teacher
- ___ Teacher Aide
- ___ Teachers' Luncheon
- ___ Other (be specific)

Extra-Curricular:

- ___ Cheerleading Coach
- ___ Special Performances
- ___ Costumes
- ___ Drama
- ___ Music
- ___ Props

Office/Clerical Work

- ___ Mailings
- ___ Receptionist Duties
- ___ Typing/PC Input
- ___ Other (be specific)

School Vehicles

- ___ Body Work
- ___ Cleaning/Detailing
- ___ Mechanic Work
- ___ Van Driver

What other professional services would you be able to render?

For Office Use Only:

Work Project:

Assigned: _____
Date Set: _____
Completed: _____

Fund Raiser:

Did family participate? _____