

ESTABROOK CHRISTIAN SCHOOL

Student Financial Aid Grant Application

SCHOOL YEAR THAT AID IS BEING APPLIED FOR: _____

THIS COMPLETED APPLICATION AND A COPY OF PARENT'S LAST YEAR'S TAX RETURN MUST BE SUBMITTED WITH THIS APPLICATION. THE STUDENT MUST BE LISTED AS A DEPENDENT ON THE TAX RETURN SUBMITTED. THE APPLICATION FOR TUITION ASSISTANCE CANNOT BE PROCESSED UNTIL THESE ITEMS HAVE BEEN RECEIVED.

STUDENT INFORMATION

Student Name _____ Grade _____ DOB ___/___/___ Age: _____

PARENT/GUARDIAN INFORMATION

Father (or Male Guardian) _____ Phone (____) _____

Address _____ City/State/Zip _____

Email Address _____

Employer _____ Monthly Gross Earnings \$ _____

Mother (or Female Guardian) _____ Phone (____) _____

Address _____ City/State/Zip _____

Employer _____ Monthly Gross Earnings \$ _____

Email Address _____

Other Income, If any \$ _____ Source of other Income _____

Example: Social Security, Disability, Alimony, Child Support)

OTHER INFORMATION

House \$ _____ monthly rent/mortgage pmt Personal Loans: _____ \$ _____ monthly payment

Car \$ _____ monthly payment Year/Make _____ Credit Cards: _____ \$ _____ monthly payment

Car \$ _____ monthly payment Year/Make _____ Other: _____ \$ _____ monthly payment

If there are circumstances that the finance committee should consider, please describe briefly:

PARENT/GUARDIAN AGREEMENT

I/We can pay at least \$ _____ towards tuition each month. (Note: This figure is **only** to aid the finance committee in its decision regarding the financial aid award and should not be construed as a parent's final commitment and/or obligation.)

I/We request consideration for financial aid for our child's/children's tuition at Estabrook Christian School for the school year _____. I/We declare that I/we have examined the information in this application and to the best of my/our knowledge, believe it to be correct and complete.

Parent(s)/Guardian(s) Signature(s) _____ Date: _____

_____ Date: _____

Please return to:

Treasurer or
Finance Committee Chairperson
Plainfield Seventh-day Adventist Church
PO Box 249
Plainfield, NH 03781