

## Eastgate Adventist Church

### Student-Aid Application

The Eastgate Church believes in Christian education and is interested in supporting families who want to send their children to Adventist schools. Eastgate has included in its budget an amount to provide aid to parents who desire a Christian education for their children. This aid is predicated on the following beliefs:

1. The primary responsibility for raising and educating children resides with the parents. We subscribe to the beliefs expressed in 1 Timothy 5:8 and I Thessalonians 4:11, 12.
2. The secondary level of responsibility resides with the student; more so as the student approaches maturity.

#### Pre-Requisites for Financial Assistance

1. Parents and children should be attending members of the Eastgate Church for at least six months (unless they have more recently moved into the area).
2. Parents must have demonstrated financial commitment to the church with tithes and offerings.
3. Student-aid is based on parental and student responsibility (it is expected that the school account be kept current).
4. Students receiving student-aid grants must continue to be in good and regular standing in the church and at the school (not suspended and/or on scholastic probation).
5. Parents may be asked to provide documentation of their financial situation.
6. Student-aid is not retroactive – not to be applied to previous accounts.
7. Decisions on financial assistance are ordinarily made during July and August for the following school year. Grants are based on available monies in the Student-Aid Account.
8. Acceptance of student-aid grants authority to the school to release to Eastgate Church the academic and financial standing of the assisted student(s).

#### Typical Student-Aid Grants:

Elementary.....up to \$1,000.00 per student per year contingent on funds available

Academy .....up to \$2,000.00 per student per year contingent on funds available

These amounts may be adjusted depending on need.

**Please return the following pages to the Church Treasurer, Secretary, or Pastor at your earliest convenience. Applications will be reviewed in the order received by the Treasurer. Your information will be held in the strictest confidence.**

Eastgate Church Student Aid Application

**Family Information**

<b>Mother</b>	<b>Father</b>
Name _____	Name _____
Address _____	Address _____
E-mail address _____	E-mail address _____
Home phone _____	Home phone _____
Cell phone _____	Cell phone _____
Work phone _____	Work phone _____
Employer _____	Employer _____
Occupation _____	Occupation _____

**Marital Status of Parent Completing this Application**

Single   
  Married   
  Divorced   
  Widowed   
  Separated

**Tuition Needs Summary**

Please list the following information for each student for whom you are requesting aid.

		<b>Column A</b>	<b>Column B</b>	<b>Column C</b>	<b>Column D</b>	<b>Column E</b>	<b>Column F</b>
Student's Name	Grade	Tuition & fees per year	Amount Parent(s) can pay per year	Amount student can pay per year	Other tuition assistance per year	Total resources (B+C+D)	Total need (Subtract the figure in column E from the figure in column A)

**Please List other Children or Dependents whom you Support Financially**

Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____

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**Budget Worksheet:** This worksheet is to help you reflect on your financial status. Please fill it out to the best of your ability.

**Monthly Income:**

Parent 1: \$ \_\_\_\_\_

Parent 2: \_\_\_\_\_

Other Income: \_\_\_\_\_

**Total Income:** \$ \_\_\_\_\_

**Monthly Expenses:**

Tithe and Offering: \$ \_\_\_\_\_

Housing: \_\_\_\_\_

Food: \_\_\_\_\_

Utilities: \_\_\_\_\_

(electricity, phone, TV, etc.)

Transportation \_\_\_\_\_

(fuel, car repair, etc.)

Monthly Debt(s) Pmt: \_\_\_\_\_

Other Expenses: \_\_\_\_\_

**Assets (net value):**

Cash, Savings, Checking Account

\$ \_\_\_\_\_

Other assets (cars, property, home(s), investments)

\$ \_\_\_\_\_

**Total Net Assets**

\$ \_\_\_\_\_

**Total Monthly Exp:** \$ \_\_\_\_\_

Additional Information:

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Signed:

Father \_\_\_\_\_ Date \_\_\_\_\_

Mother \_\_\_\_\_ Date \_\_\_\_\_

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Date received by Treasurer: \_\_\_\_\_

Date considered by Church Board: \_\_\_\_\_

Approved by Finance Committee/Board: YES/NO

Amount: \_\_\_\_\_