

Student Name/s _____

Financial Aid and Grant Program Application

Request for school year 2012-13

The Financial Assistance Program is created by the School Board to provide temporary financial assistance to those families who have a desire for their children to receive a Christian education but cannot afford the full cost of such training.

Please note that if financial assistance is granted, there is a requirement of 10 hours of volunteer service during the school year. Please be sure to complete the information on the last page regarding the volunteer service.

Please complete the application by answering all questions completely. Incomplete applications may not be processed. Incomplete information on the application will delay action by the School Board.

This form must be completed for all requested data and an official copy of your latest U.S. Income Tax Return and W-2 forms must be provided. All forms are confidential and will be seen only by the School Board. Families approved for Step Up For Students will only need to complete this application.

If the child is new to the school and registering for Grades 1-8, he/she must meet our academic criteria to be eligible for acceptance.

St. Petersburg Christian School

Kindergarten through Grade 8

2021 62nd Avenue North

St. Petersburg, FL 33702

(727) 522-3000

FOR OFFICE USE ONLY

Adjusted Gross Income 2011 _____ Name _____ Name _____

Total Annual Income 2012 _____ Approved (Y/N) _____ Approved (Y/N) _____

Living at home _____ Amount \$ _____ Amount \$ _____

Teacher Rec: Yes: _____ No: _____ Fund _____ Fund _____

McKay _____ Step Up For Students _____

New student ____ Returning student ____

STUDENT APPLICANT'S NAME _____ Grade _____
_____ Grade _____
_____ Grade _____

Type of application: ____ New ____ Renewal _____ Number of years you
have received aid

Student resides with: ____ Father ____ Mother Others (specify) _____

Total number of children living at home ____

Total number of children responsible to parents ____

Schools attended by other children in home: _____

Father

Mother

Name _____

Street Address _____

City, State, Zip _____

Phone _____

Employed by _____

Name of church
attending _____

Number of years
attending _____

Are you a member? ____ Yes ____ No ____ Yes ____ No

Minister to contact _____

Address _____

City, State, Zip _____

Phone _____

The parents' current marital status is:

____ married ____ divorced ____ single ____ separated ____ widowed

If divorced, do you receive alimony? ____ Yes ____ No

If divorced, do you receive child support? ____ Yes ____ No

INCOME INFORMATION

	<u>Father</u>	<u>Mother</u>	<u>Other*</u>
1. Taxable monthly income:			
a. Wages, salaries, tips	\$ _____	\$ _____	\$ _____
b. Interest income	_____	_____	_____
c. Dividends	_____	_____	_____
d. Other (alimony, etc.)	_____	_____	_____
2. Nontaxable income:			
a. Social Security	_____	_____	_____
b. Child Support	_____	_____	_____
c. Other	_____	_____	_____
TOTAL MONTHLY INCOME	\$ _____	\$ _____	\$ _____

(*Other family members with incomes, who contribute to the family income.)

MONTHLY EXPENSES

	<u>Family</u>	<u>Father*</u>	<u>Mother*</u>
Home mortgage or rent	\$ _____	\$ _____	\$ _____
Utilities	_____	_____	_____
Food	_____	_____	_____
Clothing	_____	_____	_____
Medical	_____	_____	_____
Credit cards	_____	_____	_____
Installment loans	_____	_____	_____
Church contributions	_____	_____	_____
Other contributions	_____	_____	_____
Other expenses (explain)	_____	_____	_____
TOTAL MONTHLY EXPENSES	\$ _____	\$ _____	\$ _____

Autos:

- | | | | |
|-----------------------------------|--------------|-------|-------|
| 1. Make _____ | Year _____ | | |
| Owned _____ | Leased _____ | | |
| Monthly payments | _____ | _____ | _____ |
| Monthly operating costs/Insurance | _____ | _____ | _____ |
| 2. Make _____ | Year _____ | | |
| Owned _____ | Leased _____ | | |
| Monthly payments | _____ | _____ | _____ |
| Monthly operating costs/Insurance | _____ | _____ | _____ |

(* Complete only if separated)

- Calculate the tuition cost for the year.
(Refer to Schedule of Tuition and Fees) \$ _____
- What is the amount of financial aid you are requesting, up to \$800.00? \$ _____

ASSET INFORMATION

	What is it worth now?	What is owed on it?
Cash, savings and checking accounts	\$ _____	\$ _____
Home: Year purchased _____		
Purchase price	\$ _____	\$ _____
Other real estate and investments	\$ _____	\$ _____
Business	\$ _____	\$ _____

VOLUNTEER INFORMATION

(If financial aid is granted, there is a requirement of 10 hours of service during the school year.)

Will parents work? _____ Mother _____ Father

Will student work? _____ Who? _____

List occupational skills _____

List times available to work _____

List type of work preferred _____

If you cannot work, why not? _____

Explanations and special circumstances _____

CERTIFICATION: I (we) declare that the information is true, correct, and complete.

_____	_____	_____
Father's signature	Mother's signature	Date