

Shore Christian Academy

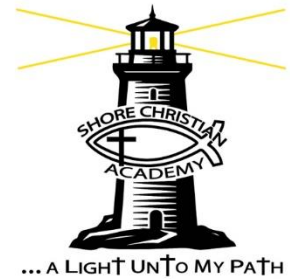
11624 Occohannock Road

Exmore, VA 23350

(757) 442-9791

shorechristianacademy@verizon.net

www.shorechristianacademy.org



Dear Parent or Guardian,

Thank you for your request of a **Tuition Assistance Application** for the 2023-2024 school year. We appreciate your interest in Shore Christian Academy.

Your completed Tuition Assistance Application **must include all** of the following items:

- Completed Tuition Assistance Application
 - Section I: Household Information
 - Section II: Relationships
 - Section III: Family Financial Statements
 - Section IV: Financial Need
 - Section V: Statement of Understanding
- Signed Certification Section
- Complete and signed copies of filed IRS Form 1040 tax returns for the past year. (Include Schedules A (Itemized Deductions), C (Self Employed), and E (Income Property))
- Copy of W2 forms corresponding to submitted IRS 1040's

All items must be submitted to the school office before your application will be considered. Incomplete applications will **STOP** the process.

Tuition assistance concludes at the end of each school year or sooner (if the recipients' financial conditions improve substantially). A new application is required for renewal but will not be considered until the previous year has been paid in full.

The deadline for the completed application is Friday, April 28, 2023.

Sincerely,

SCA School Board

Shore Christian Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities made available to the students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies and other school-administered programs.

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2023-2024 Tuition Assistance Application

This process is confidential. Your responses will be seen only by the Tuition Assistance Committee.

Please write legibly. *Note: Completion of the application does not guarantee financial assistance.*

Section I: Household Information

Student's Name: _____ Grade _____

Mailing Address: _____

Email Address: _____

Home Phone #: _____ Cell Phone #: _____

Please provide the requested information for all family members or dependent relatives living in the same household with the applicant.

Name	Family Relation	Age	Grade/Occupation

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Section II: Relationships

Please use separate paper if needed.

Please describe your current or anticipated relationship with Shore Christian Academy as a parent:

Our school cannot legally require recipients of tuition assistance to donate their services or work a certain number of hours unless the process is called a work-study program and the value of traded tuition is reported as income to the IRS. However, parents can volunteer their services. Savings to the school from donated services helps ensure continuation of this program. What gifts, abilities, or areas of interest have you volunteered with before and what can you volunteer to offer the school this year?

What church do you and your student(s) attend with regularity? _____

Describe your family's involvement in your church: _____

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Section III: Family Financial Statement

Please use figures from your most recent tax year's filing.

Income, Earnings, and Benefits

(Do not leave blanks. For zero values, enter "0")

	Parents
Most Recent Tax Form Filed (1040, 1040EZ, etc.)	
Total Number of Exemptions Claimed	
Adjusted Gross Income	\$
Income Tax Paid	\$
Income Earned from Work	\$
Social Security Benefits	\$
Temporary Assistance for Needy Families (TANF)	\$
Child Support Received	\$
Other Income and Benefits	\$

Asset Information

(Do not leave blanks. For zero values, enter "0")

	Parents
Cash, Savings, Checking, CD Accounts, etc.	\$
Stocks, Bonds, Trusts, Mutual Funds, 401, IRA, etc.	\$
Primary Residence Mortgage (approximate balance owed)	\$
Real Estate and Investment Assets- (market value) List all	\$
Real Estate and Investment Debts	\$
Business Value (include property owned/assets)	\$
Business Loan Debt	\$
List Year/Make of Automobiles (owned or leased)	Amount Owed
	\$
	\$
List Year/Make of RV's, Campers, Boats, Motorcycles, etc.	Amount Owed
	\$

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Is either parent unemployed at this time? _____

If so, when do you expect to be recalled or find new work? _____

Is either parent disabled and unable to work? _____

If yes, please explain: _____

Do you foresee any significant changes to your financial status during the coming year? Please indicate why there might be a change in income. (Include possible raises, bonuses, extra commission, loss of income, etc.)

Is there an extended family member, grandparent, parent, or close relative that could help you during this time of financial need? _____ If yes, has the person been contacted? _____ If yes, what was the result? _____

For returning families, please describe your past payment history with Shore Christian Academy.

There are times when you may not be able to fully explain your situation by putting numbers in the spaces provided. Please use this space to further explain any special or unusual circumstances that the Tuition Assistance Committee should be aware of when considering your application. You may attach additional sheets as necessary. _____

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Section IV: Financial Need

Please use figures based on current year's tuition rates and your family's budget.

Total Monthly Tuition (Include Total of all Students Enrolling)	\$
Amount I/We Can Pay Each Month (Based on 11 Months)	\$
Amount of Monthly Assistance I/We are Requesting	\$

Section V: Statement of Understanding

Please read each statement carefully.

1) Completion and submission of a Tuition Assistance Application does not guarantee enrollment or assistance to attend Shore Christian Academy.
2) If any forms are not received, the application process will be stopped . It is your responsibility to ensure that all required documents are submitted to the school office.
3) I/(we) hereby authorize the school's Tuition Assistance Committee to verify any and all information contained in this application and to make such additional inquiries as reasonably may be related to information supplied on this application form. I/(we) also agree that such information, along with this completed application with its attachments, shall remain the property of the school. Falsification of any information will disqualify applicants for tuition assistance.
4) Tuition Assistance Applications are judged primarily on financial need . Other information will be used as secondary considerations. All decisions are final .
5) Tuition assistance is provided as a benevolence of Shore Christian Academy . Receipt of tuition assistance is not a guarantee of future receipt.
6) If the Lord supplies our family with increased income during the school year, we promise to notify the school so that tuition aid can be lowered or discontinued and other families in need may benefit.
7) We understand that Shore Christian Academy reserves the right to suspend or terminate the Tuition Assistance Program at any time with written notification to those recipients who violate or misuse the privileges or policies of the program. The program may also be suspended or terminated at the end of any grading period in the event of a school financial emergency or the depletion of Tuition Assistance funds.
8) Tuition assistance concludes at the end of each academic year. You must request a new application for each academic year. Applications will not be considered until any outstanding tuition balance has been paid in full.

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Certification

I certify that the information provided in this Tuition Assistance Application is true and correct to the best of my knowledge. I understand that any falsified information will make me liable for fraud and I agree to pay all reasonable attorney's fees incurred by Shore Christian Academy as a result of fraud or misrepresentation.

I have read and agree to the **Statement of Understanding**.

If I am applying due to loss of employment, I agree to contact the school office upon any change in employment status. I understand that tuition assistance may be adjusted as a result of such change.

Print Parent's Name: _____

Parent's Signature: _____ Date: _____

Committee Use:

Date Completed Application Received	
Approved for Tuition Assistance	Yes No
If yes, amount authorized	\$
Notes:	
School Board Member Signature:	
Date:	

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