



**FAITH ACADEMY
TUITION ASSISTANCE PROGRAM**

PO BOX 4824, 2002 MOCKINGBIRD LANE, VICTORIA, TEXAS 77903
OFFICE (361) 573-2484, EXT 50 FAX (361) 573-5058

FAMILY NAME _____

FAITH ACADEMY	<u>OFFICE USE ONLY</u>
Date Received _____	
Income Tax Form _____	
W-2 Forms _____	
Total Assistance Approved/Denied _____	

THE FAITH ACADEMY TUITION ASSISTANCE PROGRAM is available for K3 through 12th grades, based on need. The Tuition Assistance Program Committee determines how funds are issued based on financial need obtained from the information on the application. Applications for assistance must be re-submitted each academic year.

Faith Academy endeavors to provide a quality Christian educational program that develops the whole person so that students may DISCOVER who God is, His purpose, His plans, and His promises; DEVELOP a Biblical worldview, Christ-like character, and essential knowledge and skills; and DEPLOY their gifts and talents for Christian witness and service all for the glory of God.

Faith Academy strives to be compassionate, generous, and good stewards of the limited resources entrusted to the school. Christian education is both a sacrifice and an investment made by ALL families. Before applying for assistance, we ask families to examine carefully their monthly expenses to determine areas that can be modified (i.e. cable, cell phone plans, car, extra-curricular activities such as select ball, dance, gymnastics, etc.).

Recipients of tuition assistance are expected to:

- ✓ pay book and registration fees in full
- ✓ have all outstanding balances paid in full
- ✓ maintain an overall average of 80 for each academic quarter
- ✓ meet the behavioral and attendance requirements of Faith Academy
- ✓ volunteer at the school – volunteer service helps keep our overhead costs and tuition down

Tuition Assistance may be revoked at any time if the above expectations are not met.

READ ALL PARTS CAREFULLY

1. A complete application must contain:
 - a. Application
 - b. Parents' Federal Income Tax 1040 Form (complete with all schedules and W-2 forms)

Items must be returned as a complete packet to the school office in the envelope provided by May 1st.

2. **IT IS ESSENTIAL THAT THE APPLICATION BE IN BY THE DEADLINE, MAY 1ST.** The Tuition Assistance Program committee reviews all applications at the designated time and available funds are then allocated to applicants at this time.
3. Notification of assistance for a family will be mailed within two weeks after receiving. **Applications received after this date will be reviewed throughout the school year based upon available funds.**

ALL INFORMATION CONTAINED IN ALL PARTS OF THE APPLICATION IS TREATED WITH THE UTMOST CONFIDENTIALITY. PLEASE ANSWER ALL QUESTIONS FULLY. FAILURE TO PROVIDE TAX FORMS AS SPECIFIED OR INSUFFICIENT INFORMATION WILL BE CAUSE TO WITHHOLD CONSIDERATION OF YOUR APPLICATION. ADDITIONAL INFORMATION THAT MAY BE HELPFUL TO THE COMMITTEE IN MAKING A DECISION IS WELCOME.



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FAMILY NAME _____

C. FAMILY INFORMATION

- Number of family members who will reside in my/our household during the next school year:
Parents _____ Children _____ Other _____
- Current Marital Status of Parent in Section B (check one).
 Single Married Widowed Divorced Divorced/remarried Separated Other
- Name of church you attend: _____ Phone Number _____
Senior Pastor _____
Are you biblically giving and serving at your local church? Yes No
Why or why not? _____
What areas? _____

D. DIVORCED OR SEPARATED PARENTS (Non-Custodial Parent's Information)

- Date of Divorce or Separation (MM/YY) _____.
- Name of parents _____.
- According to court order, when will child support end? (MM/YY) _____.
- Total Amount of Child support **received** per year by parent listed in Section B \$ _____ .00
- Total amount of child support **paid** per year by parent listed in Section B \$ _____ .00
- Is there any agreement specifying a contribution for student's education? Yes No
If YES, how much per year? \$ _____ .00
- Who claimed student as a tax dependent? _____.
- Do special circumstance "exist?" Yes No **If YES, complete Section J.**

E. PARENTS TAXABLE INCOME

YOU MUST INCLUDE THE FOLLOWING DOCUMENTATION FOR YOUR APPLICATION TO BE COMPLETED:

If you file an income tax return

- ____ A complete photocopy of your current IRS Form 1040, 1040A or 1040EZ.
- ____ Photocopies of all current W2 forms and/or 1099 forms from all employers for any wage earning parent residing with the applicant.
- ____ If you have not filed your current 1040 form, enclose your previous years 1040 and your current W2 and/or forms as described above.

If you do not file an income tax return (check all that apply)

- ____ Social Services Grant letter
- ____ Food Stamps Grant letter
- ____ Social Security Benefits Statement

F. NON-TAXABLE INCOME

List the total received for all of last year (not monthly amounts)

- | | |
|---|--------------|
| 1. Child Support | \$ _____ .00 |
| 2. Welfare (AFDC/ADS) | \$ _____ .00 |
| 3. Food Stamps | \$ _____ .00 |
| 4. Social Security/SSI | \$ _____ .00 |
| 5. Other non-taxable income | \$ _____ .00 |
| 6. Total non-taxable income (last year) | \$ _____ .00 |

G. AUTOMOBILE INFORMATION

_____	_____	\$ _____	_____
Year	Model	Mo. Payment	Final Payment Date
_____	_____	\$ _____	_____
Year	Model	Mo. Payment	Final Payment Date

H. HOUSING INFORMATION

- Do you rent or own your residence? RENT OWN
 - If RENTING, what is your monthly payment? \$ _____ .00
 - If you OWN (or in process of buying), monthly mortgage is \$ _____ .00
 - What was the year of purchase? _____
 - What is it worth today? \$ _____
 - How much do you still owe? \$ _____



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FAMILY NAME _____

I. ASSETS AND INVESTMENTS

- 1. Total amount in cash, checking and savings accounts \$ _____ .00
2. Total value of money market funds, mutual funds, stocks, bonds or other securities \$ _____ .00
3. Total value of IRA, Keogh, CD's and 401K \$ _____ .00
4. If you own investment real estate (not your primary residence) Schedule E documentation required
a. What was the original cost? \$ _____ .00
b. What is the current market value? \$ _____ .00
c. What is the amount still owed? \$ _____ .00
5. Do you own a business or farm? [] Yes* [] No
a. What is the value of your business/farm? \$ _____ .00
b. What is the amount you still owe? \$ _____ .00

* If you answer YES, please complete Section K Business Income

J. EXPLAIN UNUSUAL CIRCUMSTANCES HERE (USE ADDITIONAL SHEETS IF NECESSARY)

Please state present circumstances that create a need to Tuition Assistance.

Do you and your son/daughter agree to help with or contribute to school or activity fundraiser? [] YES [] NO

K. BUSINESS INCOME

Please enclose the following if you own a business or farm:

- 1. Copies of the last three (3) years of tax returns or
2. Copies of your Business Financial Statement for the last three (3) years.

L. HOW MUCH OF THE TUITION ARE YOU ABLE TO PAY? (REQUIRED)

Refer to Information Sheet included in your Registration Packet (Books & Registration Fees are non-refundable and must be paid in full).

TOTAL TUITION \$ _____

REQUESTED TUITION ASSISTANCE FROM FAITH ACADEMY \$ _____

PARENT SIGNATURES

We have checked this form for omissions and errors and to the best of our knowledge, the information is complete and correct. Parents' Federal Income Tax 1040 Form (complete with all schedules and W-2 forms) is attached.

Father's Signature _____

Mother's Signature _____

Date _____

FOR OFFICE USE ONLY

TOTAL TUITION ASSISTANCE APPROVED FOR \$ _____ DATE APPROVED _____
WILL DRAFT FOR: [] 10-months [] 11-months [] 12-months

APPROVAL BY: Financial Committee Member Signature _____ Superintendent Signature _____



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**FAITH ACADEMY
MONTHLY INCOME AND EXPENSE SHEET**

Student Name _____

Today's Date _____

INCOME (before taxes):

Father	
Mother	
Other (ie Child Support, Alimony, Social Security, etc)	
Other	
TOTAL MONTHLY INCOME	\$

EXPENSE:

House payment/rent	
Car Payment	
Credit Card payments	
Groceries	
Transportation (gasoline)	
Tuition (without assistance)	
Sub-total	

UTILITIES:

Electric	
Gas	
Water	
Phone/Cell Phone	
Cable	
Sub-total	

OTHER EXPENSES:

Medical Bills (including prescriptions)	
Car Insurance	
Daycare	
Savings	
Tithe/offering	
Other monthly payments	
Sub-total	
TOTAL MONTHLY EXPENSE	\$

Notice of Nondiscriminatory Policy

Faith Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.