

# The PUC Church Tuition Assistance Program For PUC Prep and PUC Elementary School

*Dear Applicant for Tuition Assistance:*

*We believe that our Seventh-day Adventist Christian education provides the best opportunities for the social, mental, spiritual and physical development of our youth. Often such an education requires great sacrifice and commitment. We will do our best to assist those families that need help and make it possible for their children to receive a Christian education. We believe in equal commitment and equal sacrifice on the part of the church and family.*

*We have a limited amount of tuition aid funds that we can share. The amount of assistance is distributed on the basis of the total number of needy students and the funds available.*

*If you feel you will need assistance it is important to process this application and return it to the school office.*

*Your Partner in Christian Education,*

*Pacific Union College SDA Church*

## Applications

- I. PURPOSE: To operate a plan for student financial tuition assistance that:
  - Assists eligible families to cover the cost of Adventist education
  - Enables all parties to know how much assistance is available to them prior to the beginning of the school year.
  
- II. ELIGIBILITY
  - Children from SDA families who are members of the PUC Church who demonstrate financial need. (Some non-SDAs may be eligible—see Principal) The need will be established by information on this application.
  - Aid recipients must always pay a portion of the total tuition.
  - The payment of student accounts committed by the family must be kept current.
  - Students are to conform to school standards.
  - Academy students are generally expected to work and contribute to the payment of their school bill.
  
- III. ORDER OF PROCEDURE
  - Families will be informed of the Tuition Assistance Program personally and through church bulletin announcements.
  - Interested families should contact the school principal with a request for assistance and pick up an application from him or her.
  - Families should turn in their application to the school principal and **expect to discuss** the information to ensure the principal's clear understanding of the details.
  - The principal will determine the apparent need beyond the parent/guardian's ability to pay the tuition.
  - The principal will present the application to the **Community Needs Committee** for the determination of the fair amount available for tuition aid funds.
  - The principal will inform the parent/guardian of the amount granted.

Pacific Union College Seventh-day Adventist Church  
Tuition Assistance Application

Student(s) Name(s) \_\_\_\_\_

Applicant's (Parent's) Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

The information requested on this form will be used by the Community Needs Committee of the Pacific Union College Church as it considers your request for assistance. This information will remain in strict confidence.

Family Information

Mother  
Name \_\_\_\_\_  
Marital Status \_\_\_\_\_  
Occupation \_\_\_\_\_  
Church Affiliation \_\_\_\_\_  
Location of Church Membership \_\_\_\_\_

Father  
Name \_\_\_\_\_  
Marital Status \_\_\_\_\_  
Occupation \_\_\_\_\_  
Church Affiliation \_\_\_\_\_  
Location of Church Membership \_\_\_\_\_

Tuition Needs Summary

Student	Grade	Monthly Tuition	Amount Parent Will Pay
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list other children or dependents that you support financially:

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

**Financial Information**

**Monthly Net Income** \_\_\_\_\_  
(Include child support and any state assistance)

**A copy of your current 1040 Tax Return must accompany this form to verify income.**

**Current Assets:** If you own any of the following, please indicate how many:

Home \_\_\_\_\_ Real Estate Property \_\_\_\_\_ Boat \_\_\_\_\_ Motor Home \_\_\_\_\_

Business (describe) \_\_\_\_\_

Investments (ballpark value) \_\_\_\_\_

Other \_\_\_\_\_

**Monthly Expenses (Expenses +Debts)** \_\_\_\_\_

Tithes and Offerings \_\_\_\_\_  
Rent or House Payment \_\_\_\_\_  
Renter/Homeowner Insurance \_\_\_\_\_  
Health Insurance \_\_\_\_\_  
Medical/Dental Expenses \_\_\_\_\_  
Food & Sundries \_\_\_\_\_  
Telephone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Internet Service or Cable \_\_\_\_\_  
Water \_\_\_\_\_  
Trash \_\_\_\_\_  
Car Insurance \_\_\_\_\_  
Gasoline/Transportation Exp. \_\_\_\_\_  
School Bills & Expenses \_\_\_\_\_  
Clothing \_\_\_\_\_  
Haircuts \_\_\_\_\_  
Life Insurance \_\_\_\_\_  
Entertainment \_\_\_\_\_  
Home Maintenance/Upkeep \_\_\_\_\_  
Savings \_\_\_\_\_

Car Payments \_\_\_\_\_  
Loan Payments \_\_\_\_\_  
Credit Card Payments \_\_\_\_\_  
Medical/Dental Debt Payments \_\_\_\_\_  
School Loan Payments \_\_\_\_\_  
Other Debt Payments \_\_\_\_\_

Is there anything else the committee should know as your request is considered? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certification: The information on this form is true and complete to the best of my knowledge. I am willing to provide additional information if needed.

\_\_\_\_\_  
Applicant's Signature