



Application for Financial Aid 2022-2023

Student Name _____ ID # _____

We would like to send our child to South Texas Christian Academy if sufficient aid is available. We can sacrificially pay the amount listed below for this school year, with the first monthly payment to be made at the time of Registration. We assume the responsibility of the remaining portion of the bill after any Church Aid and Financial Aid are credited. We also understand that the remaining balance, after our initial payment, will be divided into nine equal monthly payments from September to May, unless otherwise arranged with the Accounts Manager. **We certify that all of the information in this application is true and correct to the best of our knowledge. We have attached a photocopy of our 2021 US Income Tax forms and/or equivalent papers.** Form must be thoroughly completed to be considered.

We understand that we will forfeit Financial Aid if we do not fulfill our part of this agreement or if the conditions and requirements printed on the Tuition Estimate form (to be signed at a later time) are not met.

Amount promised to be paid in 2022-2023: \$ _____

First monthly payment due at registration: \$ _____

Parent/Guardian's Signature _____

Date _____

Spouse's Signature _____

Date _____

Documents Needed:

Date Received

- School Application
- Signed Parent 1040 from 2021
- Parent W2s
- Other _____

The following will be taken in consideration for student aid funds distribution:

- Student's grades and behavior from the previous years
- Family engagement with Christian education
- The financial situation of the family
- Active membership/attendance at a Local SDA Church

Office Use Only

Notes:



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STUDENT INFORMATION

GENERAL STUDENT INFORMATION

Student Name _____ ID # _____

Address _____ Phone _____

City/State/Zip _____

DOB _____ Social Security Number _____ Grade Entering _____ Age _____

Country of Citizenship _____ Country of Birth _____ Church Membership _____

STUDENT INCOME INFORMATION

> Does the student have summer work? YES NO Where? _____

> Does the student have work for school year? YES NO Where? _____

Estimated Summer Earnings \$ _____ Estimated School Year Earning \$ _____ Total \$ _____

If approved, the student must maintain at least a "C" in all classes, must maintain good behavior with other students and faculty, must not have record of tardiness, skipping classes, or absences that would indicate any track record of abuse pertaining to these, keep discussion of the details of this aid between the parties and do not disseminate the information with others not involved. Initials: _____

SIBLINGS

NAME	AGE	SCHOOL	Tuition	Parent's Contribution
			\$	\$
			\$	\$
			\$	\$
			\$	\$



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PARENT INFORMATION

IDENTIFICATION

	FATHER	MOTHER	GUARDIAN
NAME			
DATE OF BIRTH			
SOCIAL SECURITY #			
DRIVER'S LICENSE #			
PASSPORT #			
AU ID #			
CHURCH MEMBERSHIP			

RESIDENCE #1

Address _____

City/State/Zip _____

RESIDENCE #2-If divorced or separated

Address _____

City/State/Zip _____

CONTACT INFORMATION

HOME PHONE _____ MOBILE #1 _____ MOBILE #2 _____

EMAIL #1 _____ EMAIL #2 _____

EMPLOYMENT INFORMATION

	FATHER	MOTHER	GUARDIAN
OCCUPATION			
EMPLOYER			
BUSINESS PHONE			



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FINANCIAL INFORMATION

INCOME AND EXPENSES

MONTHLY NET INCOME		MONTHLY EXPENSES	MONTHLY PMT	ORIGINAL AMT	BALANCE REMAINING
WAGES	\$	HOUSE/RENT	\$	\$	\$
SOCIAL SECURITY PARENT	\$	VEHICLE #1	\$	\$	\$
PENSION	\$	VEHICLE #2	\$	\$	\$
CHILD SUPPORT RECEIVED	\$	CHILD SUPPORT	\$	\$	\$
INVESTMENTS	\$	UTILITIES	\$	\$	\$
WELFARE BENEFIT	\$	PHONE	\$	\$	\$
FOOD STAMPS	\$	INSURANCE	\$	\$	\$
VETERANS BENEFITS	\$	MEDICAL	\$	\$	\$
SOCIAL SECURITY STUDENT	\$	FOOD	\$	\$	\$
OTHER INCOME	\$	CREDIT CARDS	\$	\$	\$
		OTHER	\$	\$	\$
TOTAL	\$	TOTAL	\$	\$	\$

PARENTAL ASSETS

ASSET	PURCHASE PRICE	PRESENT MARKET VALUE
HOME	\$	\$
VEHICLE #1	\$	\$
MAKE/MODEL/YEAR		
VEHICLE #2	\$	\$
MAKE/MODEL/YEAR		
OTHER	\$	\$
MAKE/MODEL/YEAR		
INVESTMENTS (stocks, bonds, or other securities)		\$
BUSINESS (include your share of all business assets)		\$
OTHER REAL ESTATE		\$
CASH, SAVINGS, CHECKING		\$

I (We) certified that the above statements are true and correct to the best of my knowledge.

Parent/Guardian's Signature _____