



## STUDENT FINANCIAL AID APPLICATION FORM

“**FINANCIAL AID**” is a term used by Vacaville Christian Schools to mean a grant of a specified amount of money that has been set aside to provide financial aid for VCS students. The financial aid funds are raised and maintained through contributions, gifts and fundraising methods by interested parties and/or by the Vacaville Christian School’s Board and/or Financial Aid Committee.

To assure all students equal opportunity to fund availability, Vacaville Christian Schools provides the attached Financial Aid Application to any parent requesting one. Vacaville Christian Schools does not discriminate on the basis of denominational preference, race, color, nationality or ethnic origin.

There is rarely sufficient money to meet all requests for financial aid. Therefore, aid is awarded only as funds are available and selected. Financial Aid is not awarded in specific amounts and may be greater/lesser at the discretion of the selection committee. Financial Aid does not carry over from year to year.

**Priority is given to:**

- Students of families of greater need**
- Active church families with pastoral recommendation**
- Returning students and siblings of returning students**
- Multi-sibling VCS families**
- Families who already contribute volunteer help to VCS**
- Students of families who can verify a specific need**

Financial Aid is not necessarily limited to the above.

Financial Aid applicants must first meet all the requirements for acceptance at Vacaville Christian Schools as set forth in the handbook. The student must regularly attend a local church, which can be verified. Applying students must maintain a 2.0 (C) minimum Grade Point Average (GPA) for the previous semester and must not have any serious disciplinary or conduct problems. Since the privilege to attend Vacaville Christian Schools is in part being paid for by the sacrifice of others, it is expected that financial aid recipients be model students. It is also expected that the student and his/her family will participate in all school fundraisers and volunteer efforts where possible.

It is the purpose of the Financial Aid Fund to assist students who are otherwise qualified but lack the financial resources to attend Vacaville Christian Schools. Since there are many applicants, we request full financial disclosure including a copy of the applicant’s tax return (form 1040) for the most recent tax year. All applications are held in the strictest confidence and students who receive financial aid are not identified outside the committee. It is also requested the recipients adhere to this confidentiality.

Thank you for your interest in Vacaville Christian Schools. It is our desire to bless our families in every way possible in providing a quality Christian education.

I have fully read and understand the above statement of policies and procedures for financial aid.

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Parent(s) Signature \_\_\_\_\_ Date \_\_\_\_\_

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Child's Name \_\_\_\_\_



**FINANCIAL AID APPLICATION**  
**Vacaville Christian Schools**  
**1117 Davis Street, Vacaville, CA 95687**  
**(707) 446-1776**

Date of application \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**I. LOCAL CHURCH INFORMATION**

Church Name \_\_\_\_\_ Senior Pastor \_\_\_\_\_

Church Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Name of pastoral staff who knows you personally \_\_\_\_\_

How long have you attended? \_\_\_\_\_ years \_\_\_\_\_ months

What ministries, if any, are you involved in? \_\_\_\_\_

\_\_\_\_\_

**II. FAMILY INFORMATION**

**Mother's name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother's employer \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Father's name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Father's employer \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

If unemployed, please state reason \_\_\_\_\_

\_\_\_\_\_

**Parents are:** together separated divorced widowed

**Who is responsible for the tuition payment?** \_\_\_\_\_

**List all children attending Vacaville Christian Schools this year:**

Name/s \_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

**List all children to be in Vacaville Christian Schools next school year:**

Name/s \_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ grade \_\_\_\_\_

**III. VOLUNTEER WORK**

List any areas that you have previously volunteered at Vacaville Christian Schools:

<u>AREA</u>	<u>HOURS</u>
_____	_____
_____	_____
_____	_____
_____	_____

List areas you would be willing to volunteer for at Vacaville Christian Schools:

<u>AREA</u>	<u>HOURS</u>
_____	_____
_____	_____
_____	_____
_____	_____

Circle who can volunteer time at Vacaville Christian Schools:      **Husband**                      **Wife**

**IV. FAMILY FINANCIAL SITUATION**

Mother's monthly income	\$ _____
Father's monthly income	\$ _____
Any additional monthly income	\$ _____
Free major expenses in lieu of a payment (i.e. housing)	\$ _____
<b>Total</b>	\$ _____

**MONTHLY FAMILY EXPENSES:**

Lord's tithe to the church	\$ _____
Offerings/missions, etc.	\$ _____
Rent/Mortgage	\$ _____
Telephone	(#1)\$ _____ (#2)\$ _____
Utilities	\$ _____
Car payment (make _____ yr _____)	\$ _____
Gasoline	\$ _____
Loan/credit card(s) payment	\$ _____
Amount outstanding	\$ _____
Creditors _____	_____
Food	\$ _____
Clothing	\$ _____
Medical	\$ _____
Insurance/Retirement premiums	\$ _____
Other (explain)	\$ _____
_____	\$ _____
_____	\$ _____
<b>TOTAL:</b>	\$ _____

How much each month do you feel you can honestly afford to pay? \$ \_\_\_\_\_

Amount of financial aid you are requesting: \$ \_\_\_\_\_ (monthly)  
 \$ \_\_\_\_\_ (yearly)

