CORNERSTONE CHRISTIAN ACADEMY

Working Scholarship Program

The Working Scholarship Program allows families to perform needed janitorial duties at the school to assist with the cost of tuition.

Cornerstone budgets a certain dollar amount per month to be designated towards this program. This amount is based upon our projected enrollment and operating costs.

<u>Registration and book fees are not covered by financial aid</u> and must be paid in full according to the tuition agreement. Also, each family participating in the Working Scholarship Program will need to complete the required 25 hours of volunteer work in addition to their scholarship duties.

Families who are currently participating in the program, and still qualify, will be given first priority when turning in their application by the deadline.

Applicants must submit the following in order to apply for the working scholarship:

- ✓ A completed application
- ✓ Three months previous pay stubs and most current IRS tax filing

If chosen as a scholarship candidate we may schedule an interview with you.

WORKING SCHOLARSHIP APPLICATION

The following confidential information is needed to consider your request for financial aid. Personal interviews may be needed to finalize and approve financial aid requests.

All questions must be answered completely before your application will be processed			
*******	*******	*******	*****
SECTION I: PERSONAL INFO	RMATION		
Name:		Phone #:	
Address:			
City:	State:	Zip Code:	
Student Name:	Gra	de:	
Student Name:	Gra	de:	
Student Name:	Gra	de:	
SECTION II: FINANCIAL REQ	UEST		
A. Total cost of tuition	n fees for the school year	\$	
B. Minus maximum a	mount you can pay for the y	ear \$	
C. Total amount of fi	nancial aid requested for the	year \$	
SECTION III: FINANCIAL STA	TEMENT		
A. Total monthly family income This includes child support, alimony, disability, pensions, etc.		\$ pility,	
B. Total number of h	ousehold dependents		

SECTION V: PERSONAL STATEMENT

1. What churc	h do you attend?
2. Please prov	ide any additional details that may help us in determining your eligibility;
to perform the tasks for assistance.	I aid is limited and will be awarded to those who have a financial need and are willing required by Cornerstone Christian Academy. I request that you consider my application
to perform the tasks for assistance.	-
to perform the tasks for assistance. Date:	required by Cornerstone Christian Academy. I request that you consider my application
to perform the tasks for assistance. Date:	required by Cornerstone Christian Academy. I request that you consider my application Signature:
to perform the tasks for assistance. Date:	required by Cornerstone Christian Academy. I request that you consider my application Signature: Signature:
to perform the tasks for assistance. Date: Date: *******************************	required by Cornerstone Christian Academy. I request that you consider my application Signature: Signature:
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