## **CORNERSTONE CHRISTIAN ACADEMY**

## **TUITION FINANCIAL ASSISTANCE INFORMATION FORM**

PART 1 – Enrollment Information You must complete ALL five columns of Part	I	
1. Name(s) of Enrolled Student(s)	Date of Birth	Grad
	Date of Direct	0.00
	1	
INCOME ELIGIBILITY information		
Please check all that apply and then fill out the parts specified:		
A member of my household receives SNAP (formerly Food Stamps) and/or TANF benefits.		
One or more of my children enrolled at this school participates in Head Start		
My household includes one or more foster children	Ī	
DART 2 Total Haveshald income		
PART 2 – Total Household income		
Write how much and how frequently all income is received: weekly, every two weeks (biweekly), twice a month (semimonthly), once a month (monthly), annually		
(biweekly), twice a month (semimonthly), once a month (monthly), annually.		7
(biweekly), twice a month (semimonthly), once a month (monthly), annually.		1
(biweekly), twice a month (semimonthly), once a month (monthly), annually.	Earnings From	1
(biweekly), twice a month (semimonthly), once a month (monthly), annually.	Earnings From Work Before	
(biweekly), twice a month (semimonthly), once a month (monthly), annually.		
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of <b>Everyone</b> In Your Household	Work Before	freque
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of <b>Everyone</b> In Your Household	Work Before Deductions	freque
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of <b>Everyone</b> In Your Household  Name  1. 2.	Work Before Deductions	freque
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(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of <b>Everyone</b> In Your Household  Name  1.  2.  3.  4.	Work Before Deductions	freque
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of <b>Everyone</b> In Your Household  Name  1.  2.  3.  4.  5.	Work Before Deductions	freque
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of Everyone In Your Household  Name  1. 2. 3. 4. 5. PART 3 – certification, Signature	Work Before Deductions	freque
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of <b>Everyone</b> In Your Household  Name  1.  2.  3.  4.  5.  PART 3 – certification, Signature The adult household member who fills out this form must sign below.	Work Before Deductions	freque
(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of Everyone In Your Household  Name  1.  2.  3.  4.  5.  PART 3 – certification, Signature  The adult household member who fills out this form must sign below.  PRINTED NAME OF PARENT / GUARDIAN	Work Before Deductions  income	freque
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(biweekly), twice a month (semimonthly), once a month (monthly), annually.  List Names (First and Last) of Everyone In Your Household  Name  1.  2.  3.  4.  5.  PART 3 – certification, Signature  The adult household member who fills out this form must sign below.  PRINTED NAME OF PARENT / GUARDIAN  SIGNATURE OF PARENT / GUARDIAN  Street Address, City, state, Zip code  SCHOOL USE ONLY	Work Before Deductions  income  DATE	freque

- 1 Complete & Signed Tax Returns (2 years)
- 2 All Income Documentation
- 3 Household Member Verification
- 4 Alimony & Child Support Payments
- 5 Household Expenses
- 6 Child Care Expenses (Documented)
- 7 Other Expenses not mentioned