



CORNERSTONE CHRISTIAN ACADEMY

Student Assistance Application

2024-2025

For Office Use Only:
Date received: _____
Fee received: _____
Taxes received: _____
Decision made: _____
Award: _____
Letter sent: _____

Current families MUST submit this application along with a \$25 application fee
by April 15, 2024, for consideration for the 2024-2025 school year.
2023 Federal Income Tax Return MUST accompany this application.

Family Last Name _____

Student's Name _____
Last First Middle Date of Birth Grade in 2024-25

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Last First Middle Date of Birth Grade in 2024-25

Student's Name _____
Last First Middle Date of Birth Grade in 2024-25

Student's Name _____
Last First Middle Date of Birth Grade in 2024-25

Student's Name _____
Last First Middle Date of Birth Grade in 2024-25

Other Dependents

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Father

Name _____

Street _____

City/Zip _____

Preferred Phone _____

Primary Email _____

Employer _____

Position _____

Mother

Name _____

Street _____

City/Zip _____

Preferred Phone _____

Primary Email _____

Employer _____

Position _____

Student lives with: Both parents _____ Mother _____ Father _____ Grandparents _____ Guardian _____

Responsible for Tuition: Both Parents _____ Mother _____ Father _____ Other _____

If other, please complete the following information:

Name _____ Phone _____ Relationship _____

Address _____ Email _____

(OVER)

Church Information**Member**

Father _____	_____	_____
Church attending	Denomination	Yes/No
Mother _____	_____	_____
Church attending	Denomination	Yes/No
Student(s) _____	_____	_____
Church attending	Denomination	Yes/No

Financial InformationSources of Annual Income

Employment (Net)	_____	
Investment	_____	
Rental Property	_____	
Gifts	_____	
Child Support	_____	
Other	_____	Amount of tuition assistance
		Available from other sources
Total Family Income	_____	(family, church, etc.) _____

Please choose one.

☐ I have attached my 2023 tax return. ☐ I have filed for an extension on my 2023 taxes.

Total tuition you are requesting **TO PAY** (for all children) _____

Special Family Circumstances

CCA desires to fairly allocate the resources available to families that need financial assistance. If you are experiencing special circumstances that are placing a financial burden on your family, please describe those circumstances and the extent of the burden in the space below.

It is understood that tuition assistance funds are not readily available and are granted on an annual basis only. By signing below, you agree to support the mission of CCA and fulfill all financial obligations on time as well as communicate any significant changes in your financial situation with our Student Accounts Office.

Both parents must sign (if applicable)

_____ Parent/Guardian	_____ Date	_____ Parent/Guardian	_____ Date
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Cornerstone Christian Academy admits students of any race, color, national and ethnic origin, and of either biological sex to all the rights, privileges, programs, and activities generally accorded or made available to students of the school. In addition, the school does not discriminate on the basis of race, color, or ethnic origin in administration of its educational policies and athletic/extracurricular activities. The Academy does, however, reserve the right to deny the admission or discontinue the enrollment of any individual whose pattern of conduct and/or personal lifestyle is not in harmony with the Statement of Faith, mission, philosophy, purpose, and policies of Cornerstone Christian Academy.