

**Auburn Seventh-day Adventist Church
Student Tuition Assistance Program
2017-2018**

Application Process

- A. Please obtain a copy of the Student Tuition Assistance Application from the church office.
- B. Please complete and sign the application form.
- C. Please complete the account balance verification form with the accountant of your last school.
- D. Please return these forms (B, C) to the church office, Monday-Thursday, 9am-2pm or mail to: Auburn Seventh-day Adventist Church, PO Box 5590, Auburn, CA 95604.
- E. The tuition assistance committee will review all applications received and make decisions regarding allocation of the tuition assistance funds. You will be notified regarding your application subsequent this review.

Applications for the upcoming school year will need to be completed and returned to the church office by **July 15, 2017**. Applications received after this date will be reviewed and granted aid only as funds are available.

Auburn Seventh-Day Adventist Church Student Tuition Assistance Policy

Purpose

The purpose of this policy is to provide Seventh-day Adventist Christian education to students from the Auburn Seventh-day Adventist church that wish to attend Pine Hills Adventist Academy, who would otherwise not receive a Christian education due to financial hardship.

Based on the New Testament, we believe that as a church we have a responsibility to help one another, and that each family has primary responsibility for their child's education. (See Acts 2:45 and II Thess. 3:10)

By this we hope to communicate the value and dignity of work and the value of working together. We encourage work opportunities for all students who are of age to do so.

Thank you for caring enough about your children and their future to apply for tuition assistance. We are here to assist and to help you. Together, we can make a difference.

General Policy

It is the policy of the Auburn Seventh-day Adventist church to assist any of our members who need financial aid. We ask that church membership be held at the Auburn Seventh-day Adventist church by at least one parent/guardian for six months prior to applying for tuition assistance, with the exception of newly baptized members. This is a tuition assistance program, and requires the student's portion of their bill to be kept up to date in order for funds to be advanced from the church. This program is available to students at Pine Hills Adventist Academy.

Christian Education is a commitment; it requires sacrifice; it bears fruit for eternity.

Eligibility Criteria

- A. The student and parent (s)/guardian must regularly attend Auburn Seventh-day Adventist church and Sabbath school. Funds are limited and preference will be given to members who are actively attending church and Sabbath School.
- B. The student and parent(s)/guardian must be an active member in good standing.
- C. The student and parent(s)/guardian shall contribute to the support of the Auburn Seventh-day Adventist church with their tithes and offerings.
- D. The student must maintain an academic GPA of "C" or better each quarter. Music and PE will not count in determining the GPA.
- E. The student, parent, or guardian must be responsible for a portion of the student's tuition.
- F. The student's portion of the account must be kept current.

Auburn Seventh-Day Adventist Church Student Tuition Assistance Policy

Compliance

It is the responsibility of the student, parent, and/or guardian to monitor compliance with eligibility criteria on a quarterly basis, and take corrective action as necessary. We expect you to know when your student is out of compliance, and to take necessary steps to bring them back into compliance with the program.

The school will be responsible for providing the church finance committee with a written record of the student's GPA, and account status on a quarterly basis. The finance committee will evaluate compliance on a quarterly basis.

Non-compliance

The church finance committee will take the following actions if the above guidelines are not maintained:

- A. If the student's account is not maintained on a current basis, the church will not advance funds for the student's tuition until the account is brought up to date.
- B. If the student fails to maintain an academic GPA as listed above, the student will be placed on probation for the next quarter. At the end of that time, the finance committee will review the student's progress to determine whether or not the student may continue with the program.
- C. If the school fails to notify the church finance committee on a quarterly basis of the student's GPA, and account status, as mentioned above, the church will withhold funds for the student's tuition assistance until this information has been received.
- D. If a student is out of compliance for any reason for 2 or more quarters during the school year, the finance committee will review the student's progress to determine whether or not the student may continue with the program.

**Auburn Seventh-Day Adventist Church
Student Tuition Assistance Policy**

Disclaimer

While the applicant is required to meet the eligibility criteria in order to participate in this program, satisfying the eligibility criteria does not guarantee financial assistance. The finance committee will make the final decision in this regard, and the eligibility criteria are one guide which the finance committee uses in guiding its decision.

Voted by the Auburn Seventh-day Adventist Church Board, 9/17/01

Updated by the church finance committee 8/19/02.

Updated by the church finance committee 6/16/03

I have read the tuition assistance policy of the Auburn Seventh-day Adventist Church and I agree to abide by all of the provisions stated in this policy.

Student's signature

Date_____

Parent's signature

Date_____

**Auburn Seventh-day Adventist Church
Application for Tuition Assistance
For
Pine Hills Adventist Academy**

Account Balance Verification Form

I certify that (student) _____ was enrolled at
(school) _____ for the school year _____.

His/her current account balance is:

____ up to date

____ delinquent

(For delinquent accounts only)

The family has agreed to the following plan to bring the account up to date:

Signed,

Accountant for school

Parent

Please return this form to the church office with your completed application form.

**Auburn Seventh-day Adventist Church
Application for Tuition Assistance**

Name (Parent) _____ (Student) _____ Grade _____

Address _____

Telephone _____

Occupation Father _____ Mother _____

Place of employment Father _____

Mother _____

Church Membership ___ Auburn SDA ___ Other _____

Estimated annual Gross Income
(Please attach copy of pages 1 and 2 from last year's Federal Income Tax return)

Father _____ Mother _____ Student _____

Other Sources of Income (for example: monetary assistance from family/friends, child support, disability, investments, alimony, unemployment, food stamps, AFDC, SSI, etc.) List source(s) and amount(s) received per month.

Average monthly budget by category:	Tithe and Offerings	\$ _____
	Housing	\$ _____
	Food	\$ _____
	Automobile	\$ _____
	Utilities	\$ _____
	Medical	\$ _____
	Clothing	\$ _____
	Tuition	\$ _____
	Entertainment	\$ _____
	Miscellaneous*	_____
\$ _____	Taxes	\$ _____
	Total Monthly Expenses	\$ _____

*Please itemize if more than \$150/mo

**Auburn Seventh-day Adventist Church
Application for Tuition Assistance**

Are you expecting a change in your financial situation in the next 6 months? If yes, why?

Please have the registrar/accountant of your school last year sign the attached form verifying your student's account balance for last year.

Signature (Parent) _____ Date _____

**Auburn Seventh-day Adventist Church
Application for Tuition Assistance**

**Summary of Aid Requested
(This page must be completed)**

Student 1

Name _____ Grade _____ Age _____

Registration Fee \$ _____ Tuition \$ _____ Total \$ _____

Amount you feel you can contribute per month
toward this amount for 10 months \$ _____

Amount you are requesting in aid per month for 10 months \$ _____

Student 2

Name _____ Grade _____ Age _____

Registration Fee \$ _____ Tuition \$ _____ Total \$ _____

Amount you feel you can contribute per month
toward this amount for 10 months \$ _____

Amount you are requesting in aid per month for 10 months \$ _____

Student 3

Name _____ Grade _____ Age _____

Registration Fee \$ _____ Tuition \$ _____ Total \$ _____

Amount you feel you can contribute per month
toward this amount for 10 months \$ _____

Amount you are requesting in aid per month for 10 months \$ _____

**PLEASE DO NOT COMBINE DATA IF YOU HAVE MORE THAN ONE
STUDENT. THANK YOU.**