

CENTRAL VALLEY CHRISTIAN ACADEMY
Financial Aid for Seventh-day Adventist Christian Education Program

General Policy

- I. **PURPOSE** – The program is designed to help students who would be unable to obtain a Christian Education in a Seventh-day Adventist School. This is available for K through Grade 12 students.

- II. **DEMONSTRATION OF FINANCIAL NEED** – The parent/guardian will need to provide a photocopy of your prior year’s federal income tax forms. The parent/guardian may also want to inform us of any other circumstances that may affect your financial status for the upcoming school year.
 - A. The amount of financial aid awarded to each student will be based on the funds that are available and financial need based upon their individual calculated Likert-score

- III. **REQUIREMENTS** – The following requirements must be met before a student is eligible for Financial Aid from Central Valley Christian Academy (CVCA). Additional requirements must be met before a student is eligible for Financial Aid from their constituent church.
 - A. The student must be employed as a student worker at CVCA. A minimum of 100% of the student pay must be allotted to the student bill.
 - B. The student must maintain an academic grade average of “C” (2.0) or better each quarter.
 - C. The student must maintain a positive attitude in the areas of citizenship and attendance, along with supporting the school social activities.
 - D. The student’s account must be kept in a current status or within the arrangements made with the Business manager.
 - E. A personal interview with the Business Manager or Principal is required with the parents/guardians to go over the student’s financial package.
 - F. **ADDITIONAL CONSTITUENT CHURCH REQUIREMENTS** – If the parent/guardian is requesting assistance from the constituent church, additional information may be required. This information can be located in the “Supplemental Requirements” for this package for that church.

IV. **COMPLIANCE** – The following actions will be taken by the CVCA Financial Aid Committee to insure compliance with the above requirements of this policy.

A. Quarterly status with the school’s administration in regards to the student grades and account balance. Additional meetings may be needed when appropriate.

V. **NON-COMPLIANCE** – The following action will be taken by the Financial Aid Committee if the above requirements are not maintained:

A. If the student fails to maintain an academic grade point average of “C” (2.0) or better for any quarter or semester, the student will be placed on probation for nine (9) weeks. At the end of that time, the Financial Aid Committee will review the student’s compliance to determine whether or not the student may continue in the program.

B. If the student’s account is not maintained on a current status or in accordance with arrangements made, the Financial Aid Committee will review the student’s compliance to determine whether or not the student may continue in the program.

C. All non-compliance issues will be forward to the individual’s constituent church for review.

VI. **SHARING OF INFORMATION WITH CONSTITUENT CHURCH** – If the parent/guardian wishes to apply for student aid to one on the constituent churches, the parent/guardian understand that their financial and student grades with be shared with that church.

By signing this Policy, you agree to abide by the terms and condition set forth in this Policy. In addition, you give permission for CVCA to share your income/expense/student grade information with the institution/church you are applying for financial aid, if applicable.

Date _____

Student Signature: _____

Parent/Guardian: _____

Name of Student: _____ Grade: _____

Name of Parent or Guardian: _____ Phone: _____

Marital Status: Married _____ Separated _____ Divorced _____ Single _____

Address: _____
(Street) (City) (Zip)

Housing (check one): Rent Own

School/Church Financial Aid applying for:

- | | |
|---|---|
| <input type="checkbox"/> Central Valley Christian Academy | <input type="checkbox"/> Waterford SDA Church |
| <input type="checkbox"/> Ceres SDA Church | <input type="checkbox"/> Parkwood SDA Church |
| <input type="checkbox"/> Modesto Central SDA Church | <input type="checkbox"/> Modesto Hispanic |
| <input type="checkbox"/> Turlock SDA Church | <input type="checkbox"/> Modesto Westside |
| <input type="checkbox"/> Oakdale SDA Church | <input type="checkbox"/> Patterson Co. |

Occupation of Parent or Guardian:

Father: _____ Mother: _____

Amount of Financial Aid being requested per month: \$ _____

Amount of Family Contribution: \$ _____

Income Sources:

Father – Name of Employer(s): _____

Gross Monthly Salary \$ _____

Mother – Name of Employer(s): _____

Gross Monthly Salary \$ _____

Student (over 14) – Name of Employer(s): _____

Gross Monthly Salary \$ _____

All other income -Source: _____

Gross Monthly Salary \$ _____

Total Adjusted Gross Income (AGI) in the prior year's Federal Income 1040 tax form \$ _____

(Attach a copy of the Federal Income 1040 tax to this application. Also, include any government assistance documents, if applicable)

Dependent Information:

Name	Age	Grade (if student)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Vehicle Information (include any recreational vehicles):

Year	Make	Payment
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Extraordinary expenses (please list any extraordinary expenses that you want to include in this application. This may include medical, educational, separation, bankruptcy, ect. :

Expense	Cost
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

By signing this application, you acknowledge that everything on this application is correct to the best of your knowledge. In addition, you give your permission for CVCA to share your income/expense information with the institution/church you are applying for financial aid.

Signature (Parent): _____

Signature (Parent): _____