



Perry Hall Christian School Financial Aid Program

Revised October 2018-Applicant Family

Financial aid forms are to be completed and returned to the school office in a sealed envelope marked “PHCS Financial Aid Committee”, by April 15, 2019. Financial aid decisions will be mailed to applicant families by May 15, 2019.

Overview

The Financial Aid Program of Perry Hall Christian School is designed for families with qualified students in grades Kindergarten through grade 12. Financial aid is not available for our preschool program. In the spirit of partnership with our school families, we are grateful that resources have been made available to help our families bridge the gap between their financial means and the cost of a PHCS Christian education.

The Financial Aid Committee has the sole discretion in awarding any financial aid. While the PHCS Financial Aid Program is primarily a financial needs-based program, the Committee reserves the right to consider other criteria it deems appropriate in addition to the information provided by the applicant family. Consideration will be given to the amount of aid requested by a family in relation to the number of qualified applications received. It is the goal of PHCS to maximize the impact of our finite pool of funds available across many families.

Financial Aid Philosophy

At PHCS, we seek students who demonstrate a motivation for learning, a growing desire to submit to the Lordship of Jesus Christ, and an excitement to be a part of our community. We seek families who support their children and the mission of the school. Students who do not maintain the schools’ expectations outlined in the Student Handbook, including but not limited to compliance with the School’s code of conduct and Lifestyle Pledge, risk losing their financial aid.

Financial aid is intended only as a supplement to the family’s contribution towards a student’s education. Families are required to re-apply annually for financial aid. The award of financial aid to a family in any given year does not guarantee or imply a commitment to financial aid in any subsequent year.

Confidentiality

The Financial Aid Committee maintains strict confidentiality over financial aid files. Faculty and students are not informed of financial aid decisions. PHCS trusts that families will keep the same discretion regarding awards and decisions.

How to Apply for Financial Aid

Complete the attached financial aid form and return it to the school office in a sealed envelope marked “PHCS Financial Aid Committee” by April 15, 2019.

- Enclose a copy of Federal Tax returns for the previous 2 years. For example an application for Financial Aid for the Fall of 2019 should include tax returns for both 2016 and 2017. Please feel free to black out Social Security numbers from the tax return.

- Enclose a copy of the equivalent of your last two month's pay statements or the like for each income earner in the household.
- A PHCS staff member will ensure application packages are complete upon receipt.

The Financial Aid Application Process

PHCS awards financial aid based on demonstrated financial need to families of accepted students. In order to determine financial need, PHCS considers the following:

- Household Composition
 - Ages, grades, and education plans for dependent children in the household
- Total Family Income
 - Verified by copies of previous year's Federal Tax Return
 - Family size / number of dependents is factored into need determination using guidance outlined in the National School Lunch Program
- Requested amount of Aid
 - Due to finite size of financial aid pool and Perry Hall Christian School's desire to serve as many families as possible, applicants are encouraged to request the minimum amount of aid necessary to bridge the gap to enroll their children after all other venues and resources have been considered.
 - Requests for aid greater than 50% of the total expected family tuition bill will not normally be accepted.
 - *New Applicant Families are typically awarded up to \$1000.*
 - If the financial aid need would fall under our Widow / Orphan Scholarship Fund, please mark as such on the financial aid application. Widowed Family Scholarship is intended to help ease the burden on families who have lost a significant source of income due to the loss of a spouse and/or to aid those families who desire for their children to receive a Christian education.
- Supplemental Information
 - Families are requested to provide family budget information to both demonstrate the need for financial aid and substantiate a family's ability to afford the balance of their tuition bill.
 - Families are encouraged to inform the Financial Aid Committee of any special circumstance, background information, or temporary situation affecting financial need.

Once Financial Aid is Awarded

Once a financial aid award is awarded, the application and continuance of the award is based on the following: The parent/guardian will:

- Notify the Business Office by signing and returning award acceptance in timeline specified in letter.
- Agree with, and support the school in its mission to educate their child(ren) in accordance with the school's statement of faith, philosophy of education, and mission.
- Develop a strong relationship with the school as it relates to the education of their child(ren).
- Support the child's teachers and other members of the staff and administration.
- Remain in good standing concerning the balance of their financial obligations.
- Make every effort to ensure their child(ren) arrives to school on time and demonstrates appropriate attendance throughout the school year.
- Work with the school to ensure their child is achieving academically at or above grade level.



Perry Hall Christian School Financial Aid Application

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Academic Year: 2019-20

File # (assigned by PHCS): _____

Parents

	Name	Marital Status ** (married, divorced, separated, widowed)	Financial** Responsibility (yes/no + percentage)
Father	_____	_____	_____
Mother	_____	_____	_____

If eligible for the Widow / Orphan Scholarship Fund, please check here.

**If parents are divorced and both are financially responsible, please submit separate applications with the percentage of financial responsibility.

Dependent Children

Name: _____ 2019-20 Grade: _____

Current School _____

2019-20 School Plans: _____

PHCS application on file? (Y/N): _____.

Name: _____ 2019-20 Grade: _____

Current School _____

2019-20 School Plans: _____

PHCS application on file? (Y/N): _____.

Name: _____ 2019-20 Grade: _____

Current School _____

2019-20 School Plans: _____

PHCS application on file? (Y/N): _____.

Name: _____ 2019-20 Grade: _____

Current School _____

2019-20 School Plans: _____

PHCS application on file? (Y/N): _____.

- Enclose a copy of Federal Tax returns for the previous 2 years. For example an application for Financial Aid for the fall of 2019 should include tax returns for both 2017 and 2018. Please feel free to black out Social Security numbers from the tax return.
- Enclose a copy of the equivalent of two month's pay statements for each income earner in the household. Please provide information from the most recent month available.
- Does your family receive any financial support from relatives or other sources? (Please include support for education, trips, camps, athletics, as well as basic daily needs)

No___ Yes___ Amount (Annually / Monthly): _____

Comments:

- Do you provide financial support for any relatives? (Include live-in grandparents, overseas relatives, non-child dependents, etc)

No___ Yes___ Amount (Annually / Monthly): _____

Comments:

- Will your income increase or decrease significantly on your 2018 return?

No___ Yes___ Amount (Annually / Monthly): _____

Comments:

- Amount of Financial Aid Requested: _____

Comments:

- Annual Household Income: Please itemize all income including bonuses, dividends, interest, rent, alimony, child support, etc.

Source	Amount (Annual)
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Annual Income	\$ _____

- Family **Monthly** Budget information is requested. A suggested template follows. Please add categories as necessary.

<i>Mortgage /Rent</i>	\$	<i>Health Care Premiums</i>	\$
<i>Federal Tax</i>	\$	<i>Auto Insurance</i>	\$
<i>State Tax</i>	\$	<i>Savings</i>	\$
<i>County Tax</i>	\$	<i>Retirement / 401k</i>	\$
<i>Gasoline</i>	\$	<i>Charitable Giving</i>	\$
<i>Utilities</i>	\$	<i>Childcare</i>	\$
<i>Food</i>	\$	<i>Education / Tuition</i>	\$
<i>Loan Payments (list purpose)</i>	\$	<i>Other (list)</i>	\$
	\$		\$
	\$		\$
	\$		\$
<i>Credit Cards (list balance & monthly payment)</i>	\$		\$
	\$		\$
	\$		\$
	\$		\$
			\$

- Please use this section to explain any extraordinary circumstances or relevant details that you feel may assist the Financial Aid Committee in reaching a decision about your application. Feel free to attach a statement if necessary.

Applicant's Signature & Date:

Email Address:

Email Address:
