

Financial Assistance Policy  
(11<sup>th</sup>/12<sup>th</sup> Grade)

The Atholton Seventh-day Adventist Church is deeply committed to Christian education. Families, more specifically, the parties responsible for payment of the account, may apply for financial assistance for students in grades 11 and 12. A family requesting assistance must complete a *Student Aid Application Packet* online through the FACTS management system and may be required to talk confidentially with the *Financial Aid Committee* to discuss assistance needs. The *Financial Aid Committee* will review the application and all accompanying information to determine if the family qualifies for assistance, what type of assistance is available to the family, and the amount of assistance that is available. The *Financial Aid Committee* will make a recommendation to the Finance Committee after which the family will be notified in a timely manner of the decision of the committee and the amount, if any, of assistance to them and the terms of that assistance. Appeals may be made to the *Financial Aid Committee*.

Student aid is only available to members of the Atholton Seventh-day Adventist Church attending a Seventh-day Adventist school in the Columbia Union. To qualify for aid, the Atholton Constituency Discount Policy must be met. It is also understood that request to fund the aid with the purposes of a tax deduction is not permissible.

Since personal financial information is usually required to make proper decisions, the application and all supporting documents will be reviewed in strictest confidence by the Financial Aid Committee. To maintain this confidence, the application and all supporting documents will be submitted online through the FACTS management system.

The adjusted family income as found on line 37 of the 1040 of the tax return will be used to determine need. To qualify for aid, families must be at or below 300% of the poverty level. Aid available per student will be a maximum of \$1500 per school year payable in two equal payments at the beginning of each semester.

When the family, or person(s) responsible for the student account is notified of the committee's decision, they will be asked to sign an agreement of participation, which will include the following:

1. Continue to be a current member in good standing at the Atholton Seventh-day Adventist constituency church which includes regular attendance and support of the church, both financially and spiritually.
2. To obtain the aid, the student will sign a pledge of good citizenship, agreeing to uphold the standards of the Atholton Church.
3. To retain any aid, the student will maintain a 2.0 GPA level for each semester enrolled
4. To retain aid, students of working age will apply to the school to work and, if hired, will turn paychecks over to the school directly.
5. To retain aid, families are expected to participate in living a sacrificial lifestyle, acknowledging that others are sacrificing on their behalf to make the aid possible.

## FINANCIAL PACKET CHECKLIST AND INSTRUCTION PAGE

To be considered for financial aid from the Atholton Church, the following documents need to be turned in NO LATER THAN March 1, 2019 if you are a returning student.

### Directions:

Fill out an application on the church website (<http://www.atholton.org>) and upload all required documents. We have partnered with FACTS to facilitate this process.

All financial documents are considered private and confidential. These documents will be reviewed in confidence by the Financial Aid committee and then immediately shredded.

\_\_\_\_\_ Copy of the first page of the most recent tax returns for all working parents/  
guardians

\_\_\_\_\_ Member Report dated and signed

\_\_\_\_\_ Volunteer form dated and signed

\_\_\_\_\_ Church Commitment Form dated and signed

\_\_\_\_\_ Budget expenses

\_\_\_\_\_ Other Financial Assistance/Scholarship

School - Grade check

School - Behavior Check

**Member Report**

The family named on this form is applying for Financial Aid from the Atholton Adventist Church for the 2019/20 school year. Please return this form to *Atholton Seventh-day Adventist Church, 6520 Martin Rd, Columbia, MD 21044.*

**Family Information** *(To be completed by the family requesting aid)*

Father: \_\_\_\_\_  
Last, First, Middle

Mother: \_\_\_\_\_  
Last, First, Middle

Guardian (If applicable): \_\_\_\_\_  
Last, First, Middle

Student Names:

1) \_\_\_\_\_, 2) \_\_\_\_\_

3) \_\_\_\_\_, 4) \_\_\_\_\_

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**Church Pastor** *(To be completed by an Atholton Pastor)*

Which of the above listed adults is a member of your church? \_\_\_\_\_

Are these members in good standing at the Atholton SDA church? Yes No

Have they financially and personally invested in your church during 2018? Yes No

If No, please describe any extenuating circumstances that would address this question. \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Church Pastor

\_\_\_\_\_  
Pastor Signature

## Volunteer Activity Report Form

Please complete the following and return to *Atholton Seventh-day Adventist Church, 6520 Martin Rd, Columbia, MD 21044*

**The Following Family is Requesting Student Aid (To be completed by the family)**

Father: \_\_\_\_\_, Member: Yes No  
Last, First, Middle

Mother: \_\_\_\_\_, Member: Yes No  
Last, First, Middle

Guardian (If applicable): \_\_\_\_\_, Member: Yes No  
Last, First, Middle

Student Names:

1) \_\_\_\_\_, 2) \_\_\_\_\_

3) \_\_\_\_\_, 4) \_\_\_\_\_

**The Atholton Church thrives because of active members in church life. The Finance Committee is interested in understanding the amount of investment you have in this church.**

**Please indicate the activities you and/or your family have volunteered for in the 2018/19 school year: (please put a check by each activity that you participated in)**

\_\_\_\_\_ **Work bees (use numbers to show how many you were involved in)**

\_\_\_\_\_ **VBS**

\_\_\_\_\_ **Worship participation (song leader, deacon, etc.)**

\_\_\_\_\_ **Church events/programs (music programs, etc)**

\_\_\_\_\_ **Pathfinders, Adventurers**

\_\_\_\_\_ **Community Service events**

\_\_\_\_\_ **Office help**

\_\_\_\_\_ **Other - please list \_\_\_\_\_**

**Church Commitment Form**

Please complete the following and return to *Atholton Seventh-day Adventist Church, 6520 Martin Rd, Columbia, MD 21044*

**The Following Family is Requesting Student Aid (To be completed by the family)**

Father: \_\_\_\_\_, Member: Yes No  
Last, First, Middle

Mother: \_\_\_\_\_, Member: Yes No  
Last, First, Middle

Guardian (If applicable): \_\_\_\_\_, Member: Yes No  
Last, First, Middle

Student Names:

1) \_\_\_\_\_, 2) \_\_\_\_\_

3) \_\_\_\_\_, 4) \_\_\_\_\_

Church Name: \_\_\_\_\_

Pastor Name: \_\_\_\_\_

**CHURCH COMMITMENT:**

Although we as a church understand that we do not have a responsibility to cover tuition for any student, we understand that a big part of our mission to our young people is in educating them to become disciples of Christ through a daily focus on Him. For this reason, we, as a church, commit to purposefully inviting our congregation to participate in the ministry of Education and its Student Aid program. This could include, but is not limited to, fundraiser activities, bulletin information regarding need, up front appeals, focused prayer and attention, and budgeting for worthy student needs.

\_\_\_\_\_, Date: \_\_\_\_\_

Signature, Church Representative/Pastor

## Budget Template

Monthly income for the month of: \_\_\_\_\_

Item	Amount
Salary	
Spouse's salary	
Dividends	
Interest	
Investments	
Reimbursements	
Other	
<b>Total</b>	

Monthly expenses for the month of: \_\_\_\_\_

Item	Amount
Tithe/Offering	
Mortgage/Rent	
Car loan	
Car insurance	
House insurance	
Life insurance	
Childcare	
Charity	
Gas/electricity	
Telephone	
Cable	
Internet	
Food	
Gas/electricity	
Pet supplies	
Healthcare	
Entertainment	
Gifts	
Clothing	
Other	
<b>Total</b>	

### Income vs. Expenses

Item	Amount
Monthly income	
Monthly expenses	
<b>Difference</b>	

**Other Financial Assistance Form**

**Family Information** *(To be completed by the family requesting aid)*

Father: \_\_\_\_\_  
Last, First, Middle

Mother: \_\_\_\_\_  
Last, First, Middle

Guardian (If applicable): \_\_\_\_\_  
Last, First, Middle

Student Names:

1) \_\_\_\_\_, 2) \_\_\_\_\_

3) \_\_\_\_\_, 4) \_\_\_\_\_

We understand that the Student Aid Committee hopes to see as much effort on our part as possible to secure funding for our child(ren). Because of our desire to have our student(s) enrolled at an Adventist school, we have secured other financial assistance.

Please list any other financial assistance, aid, and/or scholarship that will be applied toward tuition.

1. \_\_\_\_\_ Amount: \_\_\_\_\_

2. \_\_\_\_\_ Amount: \_\_\_\_\_

3. \_\_\_\_\_ Amount: \_\_\_\_\_

4. \_\_\_\_\_ Amount: \_\_\_\_\_

5. \_\_\_\_\_ Amount: \_\_\_\_\_