

Application Deadline: June 15, 2025
McDonald Road Policy for Student Aid

We believe that education in a church operated school is an essential element in preparing young people to be Christian witnesses. Since some families are unable to provide for the total cost of education for their children, we are committed to assisting them when possible.

Financial aid will be determined on a semi-annual basis. Funding amounts will be determined no later than 45 days prior to the start of the 1st semester and 30 days prior to the start of the 2nd semester.

Student aid funding, determined by the committee, will be available to each qualified student (applicant) upon meeting the criteria stated below. Student aid can be withdrawn by the committee if determined that the student or parent does not meet the criteria on an ongoing basis throughout the school year.

The procedure for making application is as follows:

- a) Obtain an application for student aid at the church office
- b) Complete the application and attach:
 - 1) Monthly budget
 - 2) Copy of Tax return of the prior year (must show all income for both parents)
 - 3) Copy of the attending schools tuition cost for the year
 - 4) An application for each family requesting student aid

Student Aid Criteria:

1. Parents and children shall maintain a positive and helpful attitude toward the total program of the school system and the Seventh-day Adventist Church. A policy will be given to every applicant.
2. Parents and children are expected to support the McDonald Road Church by:
 - a) Active membership prior to the start of the fall or spring semester
 - b) Demonstrate faithfulness in tithing and giving other offerings
3. The parents/financial sponsor shall pay the remaining tuition amount on their children(s) tuition, and this payment must be kept current to assure continued assistance from the church. The parents are responsible to provide proof of current tuition payments to the student aid committee at the start of each semester. If a parent is more than 2 months behind in payments the student aid will be stopped until proof of a current up-to-date statement received by the student aid committee.
4. Students who are 16 years old and older will be required to contribute financially to their education. Work may be provided by the school system or another place of the parents or student(s) choosing. A minimum of 10 hours per week, or an average of 40 hours per month should be applied to the student(s) tuition.

*****THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF YOUR TAX RETURN!*****

5. **Student aid is available as follows:**
- a) Students enrolled at Spalding Elementary *may receive* up to a maximum of 40% of tuition and registration fee.
 - b) Students enrolled at Collegedale Academy *may receive* up to a maximum of 25% of tuition and registration fee.
 - c) Students enrolled at GA Cumberland Conference Elementary Schools or Academies *may receive* tuition and registration fee based on the percentages granted at Collegedale, not to exceed the maximum that is granted at Collegedale.
6. **Student aid funds for the 2nd semester** will be contingent upon the student receiving satisfactory grades during the 1st semester. A Satisfactory grade means a C average or above. A copy of the 1st semester grades should be submitted to the Church at close of 1st semester.

Please understand that it is the parent(s)/guardian(s) responsibility to complete an application no later than the deadlines stated above. No exceptions will be made.

Basic Information: (Please PRINT)

Parent(s)/Guardian(s): _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

School Your Child Will Attend: _____

Please check one:

Marital Status: Married () Widowed () Separated () Divorced () Single ()

Father/Guardian

Employer: _____ Phone: _____

Mother/Guardian

Employer: _____ Phone: _____

Are you a member of the McDonald Road SDA Church? Yes () No ()

Do you attend church regularly? Yes () No ()

If other than McDonald Road, please indicate where: _____

In what ministry area of the McDonald Road Church do you volunteer or participate on a regular basis? _____

If not currently volunteering, in which ministry would you be willing to volunteer?

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Financial Information (please PRINT)

Include a copy of last year(s) Federal Income Tax Return as filed with the IRS. Be sure to include all the pages and schedules as it was sent to the IRS. If Father and Mother (or guardians) live together and filed separate returns, both returns must be included with this application. If the tax returns are not included, the application will be returned to the applicant.

Please fill out the following financial information on your monthly income and expenses:

- 1. **Do you own or rent your house?** _____
Monthly mortgage payment or rent _____

- 2. **Do you own or lease your car?** _____
Monthly car/lease payment \$ _____

What is the year/make/model of this car? _____

- 3. **Do you own or lease a second vehicle?** _____
Monthly car/lease payment \$ _____

What is the year/make/model of this car? _____

- 4. **Please list other significant items you may own or lease and their payment amounts:**

5. Monthly:	INCOME \$		EXPENSE \$
Father (Guardian) Wages	_____	Church tithe & offerings	_____
Mother (Guardian) Wages	_____	Taxes & payroll deductions	_____
Interest & dividends	_____	Housing	_____
Rental Income	_____	Insurance (life, health)	_____
Alimony	_____	Utilities (water, gas, electric)	_____
Child Support	_____	Food & Clothing	_____
Other:	_____	Education	_____
Other:	_____	Other:	_____
Other:	_____	Other:	_____
Total Income:	_____	Total Expense:	_____

6. **Because the Student Aid Committee reviews each application carefully,** we need to be made aware of any special financial problems your family may be having (debts not normally incurred or insufficient income to cover normal expenses).

Please describe briefly. (Please PRINT)

Note: The Student Aid Committee must have the following payment Information provided in order to process your request! Please fill in the payment amount to be made by parents and students and the amount of financial aid requested.

Student(s) Name	Birth date	Grade	Monthly Tuition	Aid Requested	Parent	Student
_____	/ /		\$	\$	\$	\$
_____	/ /		\$	\$	\$	\$
_____	/ /		\$	\$	\$	\$
_____	/ /		\$	\$	\$	\$
_____	/ /		\$	\$	\$	\$

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