

Christian Life Academy Tuition Aid Application



What is Operation Open Door?

Operation Open Door represents a commitment from the Christian Life Academy's Board of Directors to make Christian education within the financial reach of every qualified applicant. If you have a sincere desire for your child to have a Christian education, we are prepared to work together, creating a financial plan that will work for your family.

How do I pursue financial aid?

- 1 Complete this application and submit it to the school office.
- 2 The Finance Committee (a standing committee of the Board of Directors) will review your request. We will make every effort to develop a financial plan that will work for your family.
- 3 Families receiving financial aid are expected to help with the two major fund-raising events in every possible way.

Christian Life Academy
P.O. Box 207 Seneca, PA 16346
(814) 676-9360
www.christianlifeacademy.org

Christian Life Academy Operation Open Door Application Form

Please complete this application and return it, with a copy of your most recent income tax return, to CLA, P.O. Box 207, Seneca, PA 16346: Attention: Finance Committee.

Family Name: _____

Students(s) Name(s) and Grade(s): _____

Total # of Children in the Family: _____ Total enrolled at CLA: _____

Combined Family Gross Income: \$ _____

Include Salaries and Wages, SSI, SSD, Food Stamps, Housing Assistance, Alimony, Child Support, all other types of income. We understand that your tax return will most likely show a lower income than what we are asking you to report here.

(Submit a copy of your most recent income tax return with this application.)

NOTE: Be sure to submit the **Combined Family Gross Income** that you *expect* to receive during the school year you are applying for. If the income you expect to receive is substantially different than the income reported on your most recent income tax return, please also include current pay stubs or any other type of documentation that will support this amount.

Total Tuition (before any assistance): \$ _____

Amount of Aid Requested: **(Do not leave this line empty)** \$ _____

Balance of tuition due IF amount requested is granted \$ _____

Please describe any special circumstances which have a bearing upon your financial situation.

Signature of Parents/Guardians _____ *Date* _____

NOTE: Please don't delay regular tuition payments that may be due while waiting for tuition aid to be reviewed. All information is kept strictly confidential.