

CHECKLIST FOR FAMILY APPLICATIONS 2017-2018

(To be completed by the school and kept on file for each applicant)

Name	
School	
	Household size
o Reapplication Year #	o New seat
VA Resident: o Yes o No	
Name of school district in which family re	sides:
District Scholarship Limit: \$	
If a new seat, is the student in a Christian for the first time or entering Kindergarten Income tax return or notarized statement	n/First Grade? o Yes o No
Total 2016 Household Income \$	
Completed financial assistance process:	o Yes o No
If no, reason not complete:	
Approved by:	Date approved:
o Ineligible	

CHILDREN'S TUITION FUND

731 Chapel Hills Drive, Colorado Springs, CO 80920 www.childrenstuitionfund.org

Questions? Please call or email John Wilson Office: 719.867.0125 · Mobile: 719.494.3392 · John_Wilson@acsi.org