

VICTORY CHRISTIAN ACADEMY
FINANCIAL AID APPLICATION
 Application Form is due by May 1st

Child's Name _____ Grade _____

Address _____ City _____ State _____ Zip _____

Father's Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Mother's Name _____

Address _____ City _____ State _____ Zip _____
 (If different from above)

Home Phone _____ Work Phone _____ Cell Phone _____

Financial Aid is based on the "Tuition Discount Scale According to Income."
 Financial Aid must be renewed each year by submitting a new application.

Please attach a signed photocopy of your family's most recent IRS 1040 Form and list any other income below.
 Be assured that access to this information will be limited and held in the strictest of confidence.

	OTHER INCOME	
	<u>MONTHLY</u>	OR <u>ANNUALLY</u>
Adjusted Gross Income	_____	_____
Child Support Income	_____	_____
Disability Income	_____	_____
Social Security Income	_____	_____
Other (unreported income, food stamps, etc.)	_____	_____

Are there any circumstances we should know about which would help us determine your need for a scholarship?

PLEASE MAIL COMPLETED FORMS TO:
 Victory Christian Academy
 4220 3rd Avenue West, Hibbing, MN 55746
 ATTN: Treasurer-Confidential

Signature _____ Date _____