

BELLEVUE CHRISTIAN SCHOOL

2012-2013 APPLICATION FOR FINANCIAL AID

Name of parent/guardian: _____

Address: _____

Telephone: Home: _____ Work: _____

Cell: _____

Email address: _____

Children currently enrolled at BCS (*Full-day K – 12) only:

*Half-day K with enrolled older siblings are allowed

STUDENT NAME	GRADE (2012-13)	ANNUAL TUITION
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____
	Total Tuition	\$ _____

Building Fee: \$ _____

Student Academic Services:

List name(s) _____ \$ _____

Total: \$ _____

Of the total costs, we believe that we can pay: \$ _____

Of the total costs, family and friends contribute: \$ _____

We request the remaining amount in Financial Aid: \$ _____

Signed: _____ Date: _____

IF THERE ARE MATTERS CONCERNING YOUR FAMILY OR FINANCIAL SITUATION THAT THE FINANCE COMMITTEE SHOULD BE AWARE OF, PLEASE STATE THEM ON THE BACK OF THIS FORM.

