

Cornerstone Christian School

2015-2016 Family Application for VA Tax Credit

Kindergarten-Grade 8 (K and 1st grade for returning students)

Registration Information:

Parent/Guardian's Name: _____

First Name

Middle Initial or Name

Last Name

Parent/Guardian's Name: _____

First Name

Middle Initial or Name

Last Name

Address: _____

City: _____ State _____ Zip _____

Phone H (_____) _____ W (_____) _____ C (_____) _____

Please list below all children applying for VA Tax Credit Financial Assistance.

Only children who are new to the School entering grades K-8 are eligible who are new to the School. Reenrolling students entering grades K or 1st are eligible.

	Child 1	Child 2	Child 3	Child 4
Name				
Date of Birth				
Gender				
Relation to Guardian				
School attended last year				
Grade level last year				

Conditions of Eligibility:

Household size (sum of adults and children as reported on the Financial Information Form): _____

Total 2014 household income (Please see Financial Information Form to determine income):\$ _____

Please put a check to the left of each statement to indicate if the statement is true. An affirmative answer to all of the following questions is required for scholarship eligibility.

_____ I promise to pay my child's school account in a timely and responsible manner. I understand that failure to stay current with tuition payments may result in the loss of the VA Tax Credit funds.

_____ I certify that our family qualifies for the VA Tax Credit program according to the income guidelines.

_____ I certify that the above student(s) is (are) entering K-8 in the Fall of 2015.