

Mountain View Conference of Seventh-day Adventists
APPLICATION FORM
Three-Way Educational Scholarship

The Mountain View Conference, in cooperation with certain schools, has set up a STUDENT AID FUND to assist with Christian Education for grades 9-12. This fund is administered by the Conference on the following basis:

Assistance received from the church may be matched by the Conference, and participating academies will assist according to their individual policies. The Conference has limited funds for scholarships and thusly will determine the amount to be awarded each applicant. Parents are responsible for the balance of tuition and miscellaneous expenses. A check from the church made out to the Mountain View Conference must accompany applications approved by the church. Should the student for any reason fail to complete the school year, it is intended that an appropriate amount be refunded to the organizations which have participated.

Eligibility: Students, or their parent(s), or legal guardian(s) shall be members of the Mountain View Conference of Seventh-day Adventists in order to be eligible to receive scholarship funds.

Matching funds per student per school year from the Conference are limited to up to: \$2,500 for boarding students, \$2,000 for boarding academy students living at home, and \$1,500 for Day Academy students.

The application is for the _____ - _____ School Year Grade student will be in: _____

Student Name: _____
(first name) (middle name) (last name)

School planning to attend: _____

Student Date of Birth: _____

Student Phone#: _____ Student email: _____

Is Student a member of the Adventist Church? _____ If yes, at which church? _____

Is Mother a member of the Adventist Church? _____ If yes, at which church? _____

Is Father a member of the Adventist Church? _____ If yes, at which church? _____

If none of the above are members of the Adventist Church, are any relatives? _____ Describe Relation:

The student will be living _____ at home, _____ in the dormitory, _____ or student housing.

Student's Mother: _____
First Name Last Name

Student's Father _____
First Name Last Name

Home Address _____
Street/Route/Box# City State Zip

Mother's Contact: Phone: _____ Email: _____

Father's Contact: Phone: _____ Email: _____

The cost and expected financial sources of the school-year for this student, at the school above, to the best of our knowledge, are as follows: (parent should complete as much as known and leave unknown blank)

Education Expenses

- Tuition _____
- Registration / Entrance Fee _____
- Food and Housing (not if at home) _____
- Application Fee _____
- Books and Supplies _____
- Other (specify) _____
- Other (specify) _____
- **TOTAL EDUCATION COST** _____

Payment Sources

- Parent/Guardian Support _____
- Student Work _____
- Other Family/Friends _____
- School Aid _____
- Scholarships _____
(Parents should complete above)
- Church Aid _____
- Conference Subsidy (employees) _____
- Conference Scholarship _____
- **TOTAL PMT SOURCES** _____

Parent or legal guardian signature

Date

The _____ Church Board, or its sub-committee
(Name of Church)

has taken action to aid the student _____ attending the above named school by use of the Three-Way Plan for the above school year in the amount of _____ dollars. First semester we will send _____ and second semester we will send _____.

(Signature – Church Treasurer)

(Signature – Church Pastor or Board Chair)

Date

Date

Note: Please have church make check out to **Mountain View Conference of SDA** and submit application and funds to 1400 Liberty Street, Parkersburg, WV 26101. Retain a copy of this form for your files and provide a copy to the parents. Please check to ensure everything is completely filled out and the check is enclosed. A letter from the parents or pastor, or other church leader may be included. The Conference will send funds to the school including both the amount from the local church and the Conference matching.

Office Use Only

For Students of Full-Time Exempt Employees working for the denomination

- A. Total Costs eligible For Conference Subsidy: _____ X % Rate _____ = Total _____
- B. Total assistance from scholarships, Conference Subsidy, Church Aid, School Aid, and Conference Three-Way scholarship: _____
- C. Line B divided by total Education Cost: _____ Does this exceed 85%? _____

_____ Total Matching Funds approved by the Mountain View Conference.

Signed:

Education Superintendent

Conference Treasurer

Date

Date