

# **Ebenezer Christian School**

## **Application for Scholarship**

### **2023-2024**

The purpose of the Ebenezer Christian School Scholarship Program is to help families who could not otherwise afford to send their children to ECS. Please respond to all of the following requested information. We will not be able to process incomplete forms.

Some things you need to know before filling out this scholarship application:

1. Only the Finance Committee will see your application which consists of the school Treasurer, Board President and Administrator. The only person who will know the applicants name is the Treasurer. When the committee meets, the applicants name will be redacted for confidentiality purposes.
2. You must commit to one full school year in order to be considered for assistance.
3. The annual book fee is not included as part of assistance.
4. You must pay your monthly payment on time in order to maintain your scholarship.
5. You **MUST** have sought assistance from other sources (family, friends, church, etc) prior to submitting this application, if applicable.
6. More generous consideration will be given to applications from parents who have performed (or have committed to performing) significant volunteer duties at the school.
7. Returning students who have demonstrated an appreciation for a Christian education by exhibiting a solid work ethic and cooperation with staff and school rules will be given more favorable consideration than those who lack such.
8. This form must be filled out annually and assistance will be established on a year- to- year basis. There is no implied guarantee of scholarship going forward.
9. If you are offered assistance, you are to donate 40 hours of volunteer work.
10. If you have any questions, please contact Samantha Jerred at 231-675-7779.
11. The treasurer will contact you via letter once the finance committee has made their decision.
12. If a scholarship is awarded, you must let us know **immediately** when financial assistance is no longer needed.
13. **Please complete and return the form by: July 17, 2023 for the 2023-2024 school year. Any forms turned in after this date will not be considered.**

### **HOW YOUR EFFORTS COULD GUARANTEE FINANCIAL SUPPORT FOR CHRISTIAN EDUCATION AT EBENEZER:**

1. Seek support from your church! We recommend taking your request directly to your Church's governing body.
2. Help raise funding for your school: Be actively involved in school fund-raising opportunities or events. Fundraising directly impacts the amount of money the school has available for scholarships. Currently, fundraisers account for **20% of the annual budget**.
3. Volunteer for uncompensated duties at ECS that would approximate the value of the tuition that was forgiven. Take ownership/responsibility in your child(ren)s education through sweat equity. You will need to be prepared to commit to regular hours on a weekly basis throughout the school year. Some duties that we need volunteers for include: Stewardship committee, recess duty, lunch duty, classroom aids for the preschool and main school, building maintenance, office duties, weekend janitorial duties, yard work, etc.

## PERSONAL INFORMATION

Today's Date: \_\_\_\_\_

Name of Parent(s) or Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Numbers: Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

Email Address: \_\_\_\_\_

Church where family regularly attends: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Church email address: \_\_\_\_\_

### Children whom you are requesting assistance for:

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

## SCHOLARSHIP ELIGIBILITY CRITERIA

Applicants must answer affirmatively to EACH of the items below to be eligible for an ECS Scholarship and **MUST** have asked their church family for financial assistance in order to be considered for assistance.

Applicants **MUST** have a zero balance from the previous school year in order to be considered.

	Y	N
Family maintains membership or is in regular attendance at a local church body?	<input type="checkbox"/>	<input type="checkbox"/>
Family pays at least 10% (a tithe) of the total family income to the Lord's work?	<input type="checkbox"/>	<input type="checkbox"/>
Family is in agreement with the purpose and the policies of the school?	<input type="checkbox"/>	<input type="checkbox"/>
Family is prepared to make personal sacrifices in order to provide for a Christian education?	<input type="checkbox"/>	<input type="checkbox"/>
Family has kept commitment to pay the total tuition not covered by scholarship in the preceding year?	<input type="checkbox"/>	<input type="checkbox"/>
Would paying your balance in 12 month installments instead of 10 be helpful?	<input type="checkbox"/>	<input type="checkbox"/>

## UNDERSTANDING YOUR FAMILY'S TUITION CHALLENGE

Base tuition rates (before any scholarships):

Preschool:

5 Full Days \$3,600.00/year    5 Half Days – \$3,250.00/year

Main School:

1 Pupil, K-8th: \$4,272.00/year

2 Pupils: K-8th: \$6,399.00

3 Pupils, K-8th: \$7,616.00/year

Per Pupil over 3: \$699.00 each

\*\$200.00 discount on main school tuition if you have a PreK student enrolled as well.

1. What would be your family's total tuition obligation? \$ \_\_\_\_\_
2. How much tuition are you able to pay with the help of friends or relatives for the next school year? \$ \_\_\_\_\_
3. How much has your church committed to the cause of supporting your children's Christian education? \$ \_\_\_\_\_
4. Total remaining family tuition challenge  
(Add together lines #2 & #3 and subtract from line #1. Enter total on line #4) \$ \_\_\_\_\_

## UNDERSTANDING YOUR FAMILY'S FINANCIAL LIMITATIONS:

### INCOME:

1. Total Family Adjusted Gross Income (from tax return) \$ \_\_\_\_\_  
**\*This form MUST be accompanied by a copy of your most recent tax return\***
2. Total of any other income not shown on tax return \$ \_\_\_\_\_

### EXPENSES:

1. Mortgage/Rent \$ \_\_\_\_\_
2. Annual total home or renters insurance \$ \_\_\_\_\_
3. Annual total of all utilities \$ \_\_\_\_\_
4. Annual total home maintenance \$ \_\_\_\_\_
5. Annual total property tax \$ \_\_\_\_\_
6. Annual total vehicle expenses (payments, gas, insurance, etc) \$ \_\_\_\_\_
7. Annual total health insurance expenses \$ \_\_\_\_\_
8. Annual total medical and dental bills \$ \_\_\_\_\_
9. Annual total tuition elsewhere \$ \_\_\_\_\_
10. Annual total other (ex: food, etc. please describe) \_\_\_\_\_ \$ \_\_\_\_\_
11. Total of annual family expenses (add lines #1-10) \$ \_\_\_\_\_
12. Any other debt not identified earlier? \$ \_\_\_\_\_

**OTHER POTENTIALLY RELEVANT INFORMATION**

Please describe any other potentially relevant information which would help the committee understand your need:

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Please state areas in which you will be able to commit your talents and 40 hours for the advancement of ECS this school year:

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I/We hereby declare that the information in this application to be a fair, accurate, and complete representation of our family’s financial situation. We also acknowledge that we have read and understood the purpose of the scholarship, how our efforts could guarantee financial support, and scholarship eligibility. We also understand that we are committing to one school year for any child we are requesting help and that we will need to fill this out on a yearly basis if necessary.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

You may drop your completed form off at the school or you may mail it to:

Ebenezer Christian School  
Attn: Samantha Jerred  
P.O. Box 158  
Ellsworth, MI 49729

For digital version of this form, email to [treasurer@ebenezerchristian.org](mailto:treasurer@ebenezerchristian.org)