TUITIO	N ASS	ISTANCI	APPLICATION	FORM
DATE				
DATE NAME /PARENT'S NAME		<u>-</u>		
IVAIVIE / I AILENT STVAIVIE				
ADDRESS				
PHONE NUMBER				
Name of Student(s)	Grade	School	School Address	Date Tuition is Due
(-)		00.1001		
Student/Parents of students v	who wish to enr	oll in a Christian Elemei	ntary, High School or Christian College (in	preparation of working full
	_		n writing indicating their needs so we ca	
submitted and apply the fund	ds in the best m		space below to detail your intentions and	needs moving forward for
		your/your child(rens	Christian Education.	