

Committee Approval:

## **Tuition Assistance Application**

Thanks to the generosity of others, we are able to offer tuition assistance to students who would like to come to Rockway, but who may not have enough resources. Applications will be approved by Rockway, taking into account your financial circumstances, and the overall needs of other families making application.

We believe that support of students in church-supported schools is a three-way partnership between the family, the church, and the school. In light of this, tuition assistance from the school will generally not be granted for more than 1/3 of your cost of tuition.

Please complete and return this form to the school along with your application or reapplication form.

The process to apply for tuition assistance includes:

- Completion of an application or online re-application form alongside your tuition deposit.
- Completion of Tuition Assistance Application form submitted alongside both parents' Notice of Assessment from previous tax year.
- Tuition Assistance Committee determines tuition assistance and scholarships by April 1.
- Tuition assistance granted will be credited to the student's account monthly.
- Scholarships and Tuition Assistance are considered taxable income. Therefore, each student receiving assistance will receive a T4A for income tax purposes.

Date:	School Year:
Student Name:	Grade:
Student SIN:	(must provide copy of card or verification by Rockway staff if not already on file)
Student Name:	Grade:
Student SIN:	(must provide copy of card or verification by Rockway staff if not already on file)
(If more than two students, please at	tach information on a blank piece of paper)
Parents/Guardians:	
Address:	
City:	Postal Code:
Home Phone:	Work Phone:
Home Congregation:	Cell Phone:

Financial Information	
Will you receive support from a Student Ai	d Fund? Yes No
If so, from which church?	
Total family income as per most recent inc	ome tax return(s) (line 150):
• • • • • • • • • • • • • • • • • • • •	ility, please attach photocopies of your Notices It wage earner for the most recent taxation year.
Are there other financial circumstances the include additional information if pertinent.	at we should be aware of as we process this request? Pleas
Amount of Assistance Requested:	
Financial Reference #1:	
Name:	Phone:
Relationship to You:	Email:
Financial Reference #2:	
Name:	Phone:
Relationship to You:	Email:
References may be contacted if needed to	help determine the amount of assistance required.
Signed:	

This information is collected by Rockway Mennonite Collegiate for the purpose of administering Scholarships and Tuition Assistance only. It will be retained on file while the student is enrolled at Rockway. All information on this form will remain confidential to Rockway and will not be shared with the exception of communication with the references and/or the church named above for the purposes of determining the assistance amount and to allow coordination of financial requests.

(Parent's/Guardian's Signature)