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# Walla Walla University Seventh-day Adventist Church

## Student Aid Application

The information requested on this form will be used by the Student Aid Committee as it considers your request for assistance. This information will remain in strict confidence.

### Prerequisites for Assistance

1. Parent(s) and child(ren) are to be attending members of the University Church.
2. The portion of school accounts not paid for by student aid must be kept current.
3. Students are to conform to school standards.
4. Academy students are expected to work and contribute to the payment of their school bill.

### Family Information

	Mother				Father
Name	_____		Name	_____	
Address	_____		Address	_____	
	_____			_____	
E-mail address	_____		E-mail address	_____	
Home phone	_____		Home phone	_____	
Cell phone	_____		Cell phone	_____	
Work phone	_____		Work phone	_____	
Employer	_____		Employer	_____	
Occupation	_____		Occupation	_____	

### Marital Status of Parent Completing this Application

Single   
  Married   
  Divorced   
  Widowed   
  Separated

### Tuition Needs Summary

Please list the following information for each student for whom you are requesting aid.

		Column A	Column B	Column C	Column D	Column E	Column F
Student's Name	Grade	Tuition & fees per year	Amount Parent(s) can pay per year	Amount student can pay per year	Other tuition assistance per year	Total resources (B+C+D)	Total need (Subtract the figure in column E from the figure in column A)

### Please List other Children or Dependents whom you Support Financially

Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____

**Monthly Income**

Wages (after taxes, Labor and Industry and Social Security deductions) Father \_\_\_\_\_ Mother \_\_\_\_\_  
 Child Support \_\_\_\_\_  
 State Assistance \_\_\_\_\_  
 Other (please explain) \_\_\_\_\_  
 Total monthly income \_\_\_\_\_

**Current Assets**

**Current Value**

**Amount still Owed**

Cash, savings, & checking accounts	_____	_____
Vehicles (How many? ____)	_____	_____
Home(s) (Renters, write 0)	_____	_____
Other real estate & investments	_____	_____
Business and/or farm	_____	_____
All other assets	_____	_____

**Monthly Expenses**

**Outstanding Debts**

**Purchases over \$500**

Tithe & offerings \$ _____	Car loan \$ _____	(during the past year)
Savings \$ _____	Credit Cards \$ _____	Appliances \$ _____
Rent or house pmt. \$ _____	Legal fees \$ _____	Car \$ _____
Clothing \$ _____	Medical bills \$ _____	Boat \$ _____
Food \$ _____	School loans \$ _____	Furniture \$ _____
School bills \$ _____	Student name _____	Computer \$ _____
Student name _____	School _____	Audio/Visual
School _____	Other (please explain) \$ _____	Entertainments \$ _____
Telephone(s) \$ _____	_____	Vacations \$ _____
Utilities \$ _____	_____	Hobbies \$ _____
Transportation \$ _____	_____	Other (please explain) \$ _____
Include bus fare, car payment, insurance, gasoline, repairs, etc.	_____	_____
Child support \$ _____	_____	_____
Credit cards \$ _____	_____	_____
Other insurance \$ _____	_____	_____
Internet/DSL \$ _____	_____	_____
Cable TV \$ _____	_____	_____
Other entertainment \$ _____	_____	_____
Other (please explain) \$ _____	_____	_____
_____	_____	_____
Total monthly expenses \$ _____	_____	_____

Is there anything else the committee should know as your request is considered? \_\_\_\_\_

**Certification**

The information on this form is true and complete to the best of my knowledge. I am willing to provide additional information if needed.

Applicant's name and relationship to student(s) \_\_\_\_\_  
 Are you a member of the Walla Walla University Church Yes \_\_\_ No \_\_\_  
 Address (if not already given) \_\_\_\_\_  
 Phone (if not already given) \_\_\_\_\_  
 Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Please attach to this application a copy of your most recent tax form. Thank you.

