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FOR OFFICE USE ONLY

Acceptance date \_\_\_\_\_ Receipt of Application

School Approval \_\_\_\_\_ Conference Approval

| Name of Student | Telephone ( )        |
|-----------------|----------------------|
| Pastor          | Telephone ( )        |
| Church          | School Year 20 to 20 |
|                 |                      |

## MICHIGAN CONFERENCE Project Assist

It is the desire of the Michigan Conference to make Christian education available to as many young people as possible.

Project Assist is designed to provide money on a matching basis to eligible secondary students upon request by the parents to the school. These funds are generated by the local church, academy, and the Michigan Advance Program (M.A.P.)

Parents requesting such assistance must complete the application provided and furnish all information asked for on the supplemental material requested.

Students must submit an academy application before they can be considered for project assist.

If approved by the Conference Board of Education amounts paid by the Michigan Conference (M.A.P.) funds will match the amount paid by the Academy.

These monies are available to any student who meets the criteria and desires to attend any of the Michigan Conference senior academies, but are limited by church participation and by academy and Conference funding. Funds will be paid to the academy each semester as student, parent, and local church commitments are met.

The Conference Board of Education will assign Project Assist funds as recommended by the Academy Executive/Finance Committee which will determine student eligibility.

**Revised March 2002** 

## PROJECT ASSIST

Steps required to be eligible to receive PROJECT ASSIST funds.

- STEP 1: Academy administration will provide an explanation of the program to those who request it.
- STEP 2: Parents will complete Sections 1-5 and 6 A&B.
- STEP 3: Completed Project Assist application forms and a photocopy of the parent's U.S. Income Tax 1040 or 1040-A form, will be submitted to the Academy Executive/Finance Committee.
- STEP 4: Church's Responsibility The Conference and Academy are entrusting the church with the responsibility to do the initial screening. Policies to be followed are:
  - A. These funds will be taken from church funds and may not be donated directly by family members of the student except for normal giving to the church budget.
  - B. In granting approval, the church must consider:
    - 1. The needs of the student
    - 2. The family commitment to Christian education
    - 3. The financial situation of the family

This assistance is based on NEED only, and a church cannot assume that matching funds are available to all students from the church.

- <u>The application should be reviewed by the church to insure that it is filled out completely.</u>
   <u>Incomplete applications will be returned to the applicant.</u>
- D. The church should file applications as early as possible because funds are limited.
- E. If there are questions regarding interpretation of these policies, please have the pastor, treasurer, or chairman of the Worthy Student Committee call the business manager at the Academy.
- STEP 5: The "church official" will fill out section 6 C, send the form and all supporting documentation to the academy business office.
- STEP 6: The Academy executive/financial committee will determine eligibility and submit a recommendation to the Board of Education.
- STEP 7: After approval by the Conference Board of Education, the funds will be processed and released as voted up to the amount available to the academy from MAP funds.

## PROJECT ASSIST APPLICATION

| SECTION 1 STUDENT INFORMATION                       |                               |                                 |            |  | DATE OF APPLICATION        |                        |                            |               |                         |  |  |
|---|-------------------------------|---------------------------------|------------|--|----------------------------|------------------------|----------------------------|---------------|-------------------------|--|--|
|   |                               |                                 | rst Name   |  |                            |                        | Middle Name                |               |                         |  |  |
| Address   |                               |                                 |            | Home Phone   |                            |                        | Phone                      |               |                         |  |  |
| City  |                               | State                           |            | Zip  |                            |                        | Code                       |               |                         |  |  |
| Birth Date  | Age                           | Grade App. fo                   | r S.S      | S. Number  |                            | Cł                     | Check One: ☐ Male ☐ Female |               |                         |  |  |
| Does student have a sum                             | ımer job? □ yes □ no          | What summer                     | r job      |  |                            | Est.Earnings \$        |                            |               |                         |  |  |
| If student does not have:                           | at the aca                    | he academy during the summer? I |            |  | lyes □ no □ Dorm □ Village |                        | n □Village                 |               |                         |  |  |
| Home Church   |                               | Pastor                          |            | Pasto  |                            |                        | r's Telephone ( )          |               |                         |  |  |
| SECTION 2 PARE                                      | NT/GUARDIAN INF               |                                 | וער        |  |                            |                        |                            |               |                         |  |  |
|   | ion about the parent(s) or gu |                                 |            | ancially respo   | onsible for                | r the st               | udent and who th           | e student     | resides with.           |  |  |
| Father's Name                                       |                               |                                 | Mot        | Mother's Name  |                            |                        |                            |               |                         |  |  |
| Street Address                                      |                               |                                 |            |  |                            |                        | Home Telephone ( )         |               |                         |  |  |
| Town or City  |                               | State                           | State      |  |                            |                        | Zip                        |               |                         |  |  |
| Father's Occupation                                 |                               | Employed I                      | Ву         |  |                            |                        | Business Telephone ( )     |               |                         |  |  |
| Mother's Occupation                                 |                               | Employed I                      | Ву         |  |                            |                        | Business Teleph            | Telephone ( ) |                         |  |  |
| Father's Church Members                             | ship                          |                                 | Mot        | Mother's Church Membership   |                            |                        |                            |               |                         |  |  |
| If parents of students are                          | divorced or separated, pleas  | se fill in the fol              | lowing inf | ormation cor   | ncerning th                | he othe                | er parent.                 |               |                         |  |  |
| Name  |                               |                                 |            |  |                            |                        | Telephone ( )              |               |                         |  |  |
| Street Address                                      |                               |                                 |            |  |                            |                        | Church Membership          |               |                         |  |  |
| Town or City  |                               | State                           |            |  |                            |                        | Zip Code                   |               |                         |  |  |
| Occupation  |                               | Employed E                      | Ву         |  |                            | Business Telephone ( ) |                            |               |                         |  |  |
| Total child support paid for student in (year)      |                               |                                 |            | Total child support paid for all of the brothers and sisters of student who are living with student: (year) \$ |                            |                        |                            |               |                         |  |  |
| SECTION 3 BROT                                      | HERS AND SISTER               | S                               |            |  |                            |                        |                            |               |                         |  |  |
| N   | IAME                          | AGE                             | AGE SC     |  | SCHOOL CO<br>FOR YEAR      |                        | ST AMOUN<br>BY PAF         |               | STUDENT AID<br>RECEIVED |  |  |
|   |                               |                                 |            |  |                            |                        |                            | ·             |                         |  |  |
|   |                               | -                               |            |  | -                          |                        |                            |               |                         |  |  |
|   |                               | 1                               |            |  |                            |                        |                            |               |                         |  |  |
|   |                               |                                 |            |  |                            |                        |                            |               |                         |  |  |
| SECTION 4 ASSET                                     | TS OF PARENTS                 |                                 |            |  |                            |                        |                            |               | Current Value           |  |  |
| Home \$   |                               |                                 |            |  |                            |                        |                            |               | \$                      |  |  |
| Investments (stocks, bon                            | ds or other securities)       |                                 | ,          | \$   |                            |                        |                            |               |                         |  |  |
| Business (include your sh                           | hare of all business assets)  |                                 |            | \$   |                            |                        |                            |               |                         |  |  |
| Other real estate                                   |                               |                                 |            | \$   |                            |                        |                            |               |                         |  |  |
| Cash, savings, and checki                           |                               |                                 |            | \$   |                            |                        |                            |               |                         |  |  |
| Motorized Vehicle (purchase price \$ Year           |                               |                                 | )          | ) Make   |                            | Model                  |                            |               | \$                      |  |  |
| Motorized Vehicle (purchase price \$ Year           |                               |                                 | )          | Make   |                            |                        | Model                      |               | \$                      |  |  |
| Trailers, Campers, or Boats (purchase price \$ Year |                               |                                 | )          | Make   |                            |                        | Model                      |               | \$                      |  |  |
| Trailers, Campers, or Boats (purchase price \$ Year |                               |                                 |            | Make   |                            |                        | Model                      |               | \$                      |  |  |

TOTAL

| MONTHLY TAKE HOME INCOME  |                                      |   | EXPENSES  | BALANCE<br>DUE  | MONTHLY PAYMENT |                            |  |  |  |
|---|--------------------------------------|---|---|---|-----------------|----------------------------|--|--|--|
| Wages (Net)   |                                      | Home (mortg   | age 🗌 or rent 🔲)  |   |                 |                            |  |  |  |
| Part-Time Work  |                                      | Motorized Ve  | hicles  |   |                 |                            |  |  |  |
| Social Security   |                                      | Motorized Ve  | hicles  |   |                 |                            |  |  |  |
| Pension   |                                      | Trailers, Cam   | pers, or Boats  | ·   |                 |                            |  |  |  |
| Child Support   |                                      | Utilities   |   |   |                 |                            |  |  |  |
| Investments   |                                      | Telephone   | · · · · · · · · · · · · · · · · · · ·   |   |                 |                            |  |  |  |
| Other   |                                      | Insurance   | **************************************  |   |                 |                            |  |  |  |
|   |                                      | Total Credit C  | ard Debt  |   |                 |                            |  |  |  |
|   |                                      | <u>'</u>  | es, use separate if neces   | searv   |                 |                            |  |  |  |
|   |                                      | Other expense   | 50, 400 copulato il 11000   |   |                 |                            |  |  |  |
| Total   |                                      |   |   |   |                 |                            |  |  |  |
| Iotal   |                                      | NOTICE TO PARENTS   |   |   |                 |                            |  |  |  |
| I (We) certify that the income tax form 10 agency of all benefit Signature of Parent  | ts from the governi<br>(s)/Guardian: | ment.   | orrect to the best of my<br>or if I (we) receive gove   | (our) knowledge. I (we) have also included rnment assistance I (we) will send a copy ce |                 | f my (our) U.S.<br>ernment |  |  |  |
|   |                                      |   | ,   |   |                 |                            |  |  |  |
| PROPOSED BU   | JDGET AND                            | AGREEMEI  | VТ  |   |                 |                            |  |  |  |
|   |                                      |   |   | E USE ONLY  |                 |                            |  |  |  |
| CHARGES   |                                      | INCOME  |   |   |                 |                            |  |  |  |
| Student   |                                      |   |   |   |                 |                            |  |  |  |
| General Fee   |                                      |   |   | Summer Earnings   |                 |                            |  |  |  |
| Tuition (10 months)   |                                      |   | Work During the School Year (9 Months)  |   |                 |                            |  |  |  |
| Educational Flat Rate (10 months)   |                                      |   | Parents   |   |                 |                            |  |  |  |
| Room (10 months)  |                                      |   | Entrance Fee Estimated Monthly Payment (9 Months)   |   |                 |                            |  |  |  |
| Board (10 months)  Music  |                                      |   | Church Project Assist (10 Months)   |   |                 |                            |  |  |  |
| Bookstore   |                                      |   |   | School Project Assist (10 Months)   |                 |                            |  |  |  |
| Dougle  |                                      |   |   | Conference Project Assist (10 Months)   |                 |                            |  |  |  |
|   |                                      | Total Charges   |   |   | Total Income    |                            |  |  |  |
|   |                                      |   |   |   | Difference      |                            |  |  |  |
| SECTION 6   |                                      |   |   |   |                 |                            |  |  |  |
| A. STUDENT  |                                      |   |   | C. CHURCH   |                 | -                          |  |  |  |
| I would like to attendAcademy, and I am willing to work as much as possible during the summer and school year. I understand that I may be assigned to work at an academy industry when I become 16 years old.   |                                      |   | The (Name of Church) is willing to assist the above named student in attending Academy with \$ for the school year. Theses funds will be taken from church funds and will not be accepted from the applicant's parents. The church has followed policies listed on application for approval of funds. |   |                 |                            |  |  |  |
| Signature of Studen   | t                                    | Date  | 9   |   |                 |                            |  |  |  |
| B. PARENTS  |                                      | · ·   |   |   | Date            |                            |  |  |  |
| I assume the responsibility of the remaining portion of the bill after student labor and student aid have been credited to my child's account. I understand that my child may be assigned to work in an academy industry when he/she becomes 16 years of age. |                                      | D. ACADEMY  Academy is willing to assist the above for the school year. |   |   |                 |                            |  |  |  |
| Signature of Parent/  | Guardian                             | Date  | <del></del>   | Signature of Principal  |                 |                            |  |  |  |
| Olympia of Farefity   | - au miuli                           | Date  | -   | Date of School Board Action   |                 |                            |  |  |  |
|   |                                      |   |   |   |                 |                            |  |  |  |

SECTION 5 FAMILY INCOME AND EXPENSES