



120 College Drive
Pearl, MS 39208
601.933.0990

Worthy Student Scholarship

General Objective

The objective of the Worthy Student Committee is to see that students who demonstrate scholarship, commitment, and financial need receive assistance in obtaining a Christian education at College Drive Christian School.

Application

This application form has been developed to provide the Worthy Student Committee the necessary information to evaluate a Worthy Student Scholarship request. If the form is not complete (ever blank completed). this application may be denied due to inadequate information. The information you provide will only be used for the evaluation of the request and will be confidential.

Policy Guidelines

1. The objective of the Worthy Student Committee is to see that students who demonstrate scholarship, commitment, and financial need receive assistance in obtaining a Christian education at College Drive Christian School.
2. Copy of your most current pay stub, utility bills, rent or mortgage information, and W-2 is required with application.
3. The incompleteness of an application is sufficient grounds for denial.
4. Failure of parents to meet their financial obligations at College Drive Christian School may result in discontinuance of assistance.
5. Parent and student agree to adhere to the Christian standards and policies of College Drive Christian School.
6. Application must be completed annually.

General Authorization

I/We hereby authorize College Drive Christian School to verify past and present employment and earnings records.

I/We further authorize College Drive Christian School to obtain all credit reports necessary to verify and confirm credit information. It is understood that a photocopy of this document shall also serve as an authorization to provide the information requested.

The information obtained is only to be used in the processing of my/our request for the award of the Worthy Student Fund scholarship.

Signature of Applicant	Date	Social Security Number
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Print Father's Name

Signature of Applicant	Date	Social Security Number
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Print Mother's Name

Worthy Student Scholarship Application

Application Date _____ Student Name _____ Grade _____

The parent/guardian requesting financial aid is required to provide the following with this application.

Parent | Guardian Information

Last Name _____ First Name _____ Middle Name _____
Address _____ City _____ State _____ Zip _____
State of Birth _____ City of Birth _____ Country of Birth _____
Home Phone _____ Cell Phone _____ Work Phone _____
Time at current address: Years _____ Months _____ Church Membership _____

Previous address if length of time at current address is less than five years.

Address _____ City _____ State _____ Zip _____

Marital Status of Parents:

- Married and living together Separated
 Divorced Widowed

If separated or divorced, give name, address, and phone number of parent not in the home:

Name _____ Address _____ Phone _____

Employment Information

Father _____	Mother _____
Occupation _____	Occupation _____
Employer _____	Employer _____
Work Address _____	Work Address _____
Work Phone _____	Work Phone _____
Length of Employment _____	Length of Employment _____

Income Information

Father _____	Mother _____
Gross Monthly Income _____	Gross Monthly Income _____
Other Monthly Income _____	Other Monthly Income _____
Total Monthly Income _____	Total Monthly Income _____
Yearly Gross Income _____	Yearly Gross Income _____
Number of Dependents _____	Number of Dependents _____

Dependent Information

Do you have other children attending SDA schools? Yes No

If yes, list the student's name(s) and schools below.

1st Child _____

2nd Child _____

3rd Child _____

4th Child _____

5th Child _____

Monthly Expenses

CDCS Tuition

Food

Groceries \$ _____

Utilities

Electricity \$ _____

Gas \$ _____

Water \$ _____

Garbage/Sewer \$ _____

Phone \$ _____

Internet/Cable \$ _____

Home

Mortgage \$ _____

Rent \$ _____

Insurance

Auto \$ _____

Medical \$ _____

Life \$ _____

Home/Renters \$ _____

Family

Child Support \$ _____

Alimony \$ _____

Donations

Tithe/Offering \$ _____

Other

_____ \$ _____

Total Living Expenses \$ _____