



Noah's Ark Preschool

Tuition Assistance Application

Noah's Ark Preschool believes all children should have access to quality, Christian education, and we never want finances to keep a child from being able to attend our programs. We are extremely thankful, that through generous donations, we have tuition assistance available as part of a Memorial Scholarship Fund. Families experiencing financial hardship, and in need of assistance, should complete and return this application to the Preschool Director. Tuition assistance dispersion is based on number of applicants and availability of funds. Please be assured that all information on this form will be kept confidential and will only be shared and reviewed by the members of the Noah's Ark Preschool Board. Noah's Ark Preschool does not discriminate on the basis of race, color, national and ethnic origin in its education or admissions policies, scholarship programs, and other school-administered programs.

Child's Name _____ Date of Birth _____

Parent/Guardian 1 Name _____

Address _____

Is this parent/guardian currently employed? Yes / No | Full Time / Part Time

Employer, if applicable _____

Parent/Guardian 2 Name _____

Address _____

Is this parent/guardian currently employed? Yes / No | Full Time / Part Time

Employer, if applicable _____

Number of Wage Earners in Household _____

Number of Dependents in Household and Ages _____

To the best of your ability, please describe your financial situation and any extenuating circumstances that you feel make you eligible for Noah’s Ark Tuition Assistance.

The Noah’s Ark Memorial Scholarship Fund offers tuition assistance to as many students as possible, dependent on funding. We ask that applicants examine their financial situation, and honestly communicate their needs. To lift the financial burden of monthly tuition, what discount percentage are you requesting at this time?

10% 25% 40% 50% Other: _____

By signing this form, I hereby agree:

- 1. All information given on this form is accurate.
- 2. I will inform the Preschool Director if our income changes and we no longer need financial assistance, so that funds may be available to others in need.

Parent/Guardian 1 Signature

Date

Parent/Guardian 2 Signature

Date