

547 W. Nees Ave, Clovis, CA 93611 ▪Phone: 559-298-0023▪Fax: 559-298-0014

Email: *frontdesk@vcsfresno.net*▪Website: *www.vcsfresno.net*



**2024-25 Financial Aid Application**

**Application Deadline: *Monday, July 15, 2024***

VCS is offering a number of Financial Aid Applications that will be granted only to those families who meet the criteria established by the Financial Aid Committee.

**Please be notified that Financial Aid is only for tuition purposes. Other fees such as registration, testing, and cost of books must be PAID IN FULL prior to the start of classes.**

Please be notified that:

* Financial Aid is funded through *Zakat*/*Sadaqa* money to help qualified needy families only. If you feel you are not eligible to receive *Zakah*, you should not apply.
* Financial Aid may be terminated at any time during the year if any or all of the criteria listed below change or are not sustained.
* All applications must be returned with required documents by mail, E-mail, or in person at the school office by the deadline date.
* Late and/or incomplete applications will not be considered – **No Exceptions**!
* Parents/Guardians of the financial recipients are mandated to volunteer for a number of hours per academic year as instructed by administration, according to the amount of discount he/she will receive.
* If the application is approved by the board, the applicant will have to sign the attached agreement with the administration that lists guidelines to be adopted by the applicant for the continuation of the Aid.**(Failure to sign the agreement will deem the application incomplete).**
* If the application is not approved by the Financial Aid Committee or by the School Board, the applicant will have to pay the full tuition amount of $525.00 per month.
* If the applicant’s income changes during the year, he/she is mandated to notify the VCS Financial Aid Committee.

**Qualification Criteria:**

* Family’s annual income.
* Student’s satisfactory academic performance, behavior and discipline.
* Meeting application deadline.
* Parent volunteerism.

**Application Process:**

Please provide a copy of the following: **(Failure to provide these statements will deem the application incomplete).**

* Current academic performance – report card.
* Proof of income (pay stub or W-2 form).
* Last two months Bank Statement.
* Proof of expenses (Apt. rent/ House payment, car payment etc.).
* IRS Tax returns for the **last two years**.

**Application Review Process:**

The VCS Financial Aid Committee will review and rank each application. Where deemed necessary, interviews will be arranged with the parents. Eligibility will be determined based on the criteria mentioned above, as well as other factors. Final recommendations will be submitted to the School Board for final approval. **Applicants will be notified of the final decision taken on each application via mail or phone by Monday, July 31, 2024.**

**2024-25 VCS Financial Aid Application**

Please fill in all the fields correctly and clearly. Any false information provided on this form will automatically nullify your eligibility for financial aid.

Date Submitted: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name:

 *(first) (last)*

SS#

Home Address:

Cell Phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer's Name & Address:

Position: Monthly Income: $

Supervisor's Name: Supervisor's Phone # ( )

Spouse's Name: SS#:

Spouse's Employer & Address:

Position: Income: $Monthly Bi-Weekly Weekly

List below all children who live in your household:

|  | ***Name*** | ***Age*** | ***Grade*** | ***Enrolled @ VCS?*** | ***Applying for FA?*** |
| --- | --- | --- | --- | --- | --- |
| ***1*** |  |  |  |  |  |
| ***2*** |  |  |  |  |  |
| ***3*** |  |  |  |  |  |
| ***4*** |  |  |  |  |  |
| ***5*** |  |  |  |  |  |

List any government assistance programs you are currently enrolled in:

Do you own/lease your house/apartment? Monthly Payment:

List all cars/vehicles that you own and their monthly payment(s):

|  | ***Model*** | ***Year*** | ***Monthly Payment*** |
| --- | --- | --- | --- |
| ***1*** |  |  |  |
| ***2*** |  |  |  |
| ***3*** |  |  |  |
| ***4*** |  |  |  |

What kind of volunteer work are you willing to do? (Minimum # hours/week are required):

What do you **estimate** that you can pay for tuition? \* $

*\*Please note that the financial committee will make the final decision on how much will be paid. This estimate gives a better understanding on how much financial aid you are seeking.*

**For Office Use Only:**

Approved:  Yes  Partial Denied  Incomplete

Total tuition due each month: $

Number of months financial aid granted: \_\_\_\_\_\_\_\_\_\_

Starting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic year: 2024-25

*Special Notes:*

**I certify that the above information is true and accurate to the best of my knowledge. I have read and understand the instructions mentioned above and agree to abide by the rules of VCS Financial Aid Committee.**

**Signature *(Guardian/Parent)*:** **Date:**

**Financial Aid Committee:** **Date:**

**1. 2. 3.**

**Reduced Tuition Agreement**

Valley Crescent School is hereby entering into a contract with

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, regarding their child

           Parent(s)/Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, dated this day, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

           Student

The terms for a reduced tuition during the 2024-25 school year are as follows;

The commitment *from VCS* is,

1. A reduced tuition fee.
2. The student will have all the same rights as a full-paying student.

The commitment *from Parent and Student* is,

1. Parents must pay the agreed-upon tuition on time.

1. Parents must inform VCS within 30 days of any change in their ability to pay.
2. The Student and parent are to honor all the policies listed in the Parent Student Handbook
3. The Student must maintain a “C” or better average in ALL their classes.
4. Parents must volunteer at VCS a minimum of 15 hours a month.

**Days, times, and type of volunteer work at the school:**

Note: This contract can be terminated if the commitments are not met by the students or parents.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Name and Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Principal                                             Date

**Tuition Waiver Agreement**

Valley Crescent School is hereby entering into a contract with

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, regarding their child

           Parent(s)/Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, dated this day, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

           Student

The terms for a tuition Waiver during the 2024-25 school year are as follows;

The commitment *from VCS* is,

1. Full tuition waived.
2. The student will have all the same rights as a full-paying student.

The commitment *from Parent and Student* is,

1. Parents must inform VCS within 30 days of any change in their ability to pay.
2. The Student and parent are to honor all the policies listed in the Parent Student Handbook
3. The Student must maintain a “C” or better average in ALL their classes.
4. Parents must volunteer at VCS a minimum of 20 hours a month.

Note: This contract can be terminated if the commitments are not met by the students or parents.

**Days, times, and type of volunteer work at the school:**

**------------------------------------------------------------------------------------------------------------------**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Name and Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Principal                                             Date