



APPLICATION FOR FINANCIAL ASSISTANCE
Academic Year 2010-2011

Legacy Christian Academy is committed to building and maintaining a diverse community. We strive to attract students and families from different cultural and economic backgrounds, and we understand that attending Legacy may pose a significant financial burden for some. To assist these families, the Board of Trustees has established the financial aid fund. The purpose of our financial aid program is to remove financial barriers, not create financial inducements. Legacy administers financial aid on a need-only basis.

1) Applicant's Name: _____ For Grade: _____
Applicant's Name: _____ For Grade: _____
Applicant's Name: _____ For Grade: _____

2) Are there additional sources of income that might be applied to the education of the applicant(s), such as assistance from other family members or friends, trusts? Please explain.

3) Total dollar amount available from all sources for each applicant's education: \$ _____

4) Has the **Financial Aid for School Tuition (FAST)** online application been completed? ____Yes ____No
If yes, when? _____

5) Have you sent a signed copy of your most recent **1040 Federal Tax Form** (including all schedules) and a copy of your **W-2** forms to the Legacy Christian Academy Financial Aid Office? ____Yes ____No
If no, please explain.

6) Please include (on reverse side or on another sheet of paper) any additional information that will assist the Financial Aid Office in considering your application for financial assistance.

(Signature of Parent or Guardian)

(Date)

(Signature of Parent or Guardian)

(Date)

Legacy Christian Academy is committed to its admission policy as non-discriminatory of the basis of race, color, religion, gender, national or ethnic origin, and to administer its policies and programs accordingly.

Please return this form and supporting tax documents as soon as possible to:

Financial Aid Office
Legacy Christian Academy
8200 Highway 105
Beaumont, TX 77713