



# **HERITAGE CHRISTIAN ACADEMY**

**8349 Eagle Way Bypass  
Hopkinsville, KY 42240  
(270) 885-2417  
www.HCAHopkinsville.org**

## **FELLOWSHIP GRANT PROGRAM**

Heritage Christian Academy exists only because of the willingness of God's people to sacrifice. We are supported by the faithful and sacrificial giving of school families, staff members, board members, and others. Here at HCA, sacrifice on the part of all who are involved is accepted as the cost of participation. Our teachers and staff, for all their excellent skills and education, work for much less than they could be earning elsewhere. They continue here because they recognize Christ's call on them, counting it a privilege to serve God's people. Many local businesses and parents have donated hours of service and money to take HCA from vision to reality. The Bible also admonishes that we be careful not to take advantage of the willingness of God's people to sacrifice. We believe the sacrifice should be balanced.

Galatians 6:5 urges that "Each person should carry his own load" and Acts 11:29 encourages that each contribute "...according to his ability." Paul often calls attention to his paying his own way to avoid becoming a burden to any of his fellow Christians (1 Thessalonians 2:8, and 2 Thessalonians 3:7-8). In 2 Corinthians 12:25, he also exhorts us to "have equal concern for each other." In that same letter, he speaks to the "privilege of sharing" in the responsibility of sacrifice (8:4). The Biblical standard is not that there be equal giving, but that the sacrifices be equal, according to ability. As you consider what you are able to pay toward your children's tuition this year, do so prayerfully, and remember the privilege of sharing sacrificially. God will bless you!

### **APPLICATION GUIDELINES:**

We have a process to help determine an applicant's need and the school's ability to help. Please keep in mind the following:

1. We do not grant assistance for students in the Pre-K3 and Pre-K4 program. Tuition for our preschool programs is less than the cost of day care. Our programs are academic pre-school programs, and we believe they are well worth the cost.
2. The school does not have an endowment. Any assistance given comes from the school budget, which means we cut needed supplies or equipment. Families seeking assistance are required to seek help from family members and their local church first. In addition, we may require you to participate in some financial counseling as well as volunteer at the school.
3. Parents are asked to complete all items of information on this confidential form. After you have completed the form, you may be asked to meet with the Headmaster and a member of the Finance Committee to review your information. Couples are encouraged to attend together. During this meeting we will determine a monthly payment plan. You are still responsible for paying the registration and all instructional fees. Financial aid is dependent on the amount available in our budget.



Parent's Name(s) \_\_\_\_\_

Names and grades of students at HCA \_\_\_\_\_

Number in Family \_\_\_\_\_ Do you have any children in college? \_\_\_\_\_

FAMILY INCOME (Include children's income) \$ \_\_\_\_\_

**Please attach a copy of the front page of your most recent tax return, showing your ADJUSTED GROSS INCOME, plus any supporting documents. Your application will not be considered until these are turned in.**

**PLEASE LIST THE VALUE OF YOUR ASSETS:**

Cash in Bank (checking, savings, etc.) \$ \_\_\_\_\_

Securities, Stocks, Bonds, Mutual Funds, etc. \$ \_\_\_\_\_

Real Estate \$ \_\_\_\_\_

Accounts or Notes Receivable \$ \_\_\_\_\_

Automobiles \$ \_\_\_\_\_

ATV's, boats or other vehicles \$ \_\_\_\_\_

Cash Value Insurance \$ \_\_\_\_\_

Personal Property (jewelry, furniture, etc.) \$ \_\_\_\_\_

**TOTAL ASSETS** \$ \_\_\_\_\_

**TOTAL DEBTS** (Credit card, mortgage, auto or loans) \$ \_\_\_\_\_

For office use only:

Date Received \_\_\_\_\_ Denied \_\_\_\_\_ Approved % - Amount \_\_\_\_\_



## CONFIDENTIAL STATEMENT OF FINANCES

We have filled out the requested information and understand that any fellowship grant available is \$2,500.00 or less, per student, based on grade level. We also acknowledge that we are responsible for paying registration and fees in full, as well as our portion of tuition. We understand that by completing this form we are in no way guaranteed of being approved for a fellowship grant.

We attend church at \_\_\_\_\_ Pastor's Name \_\_\_\_\_

We have contacted the following persons first regarding helping with tuition:

**Relatives** \_\_\_\_\_

\_\_\_\_\_

**Church/Pastor** \_\_\_\_\_

**Others** \_\_\_\_\_

Please list the results of these requests:

Total HCA Annual Tuition \$ \_\_\_\_\_ Assistance Requested \$ \_\_\_\_\_

If we are approved, we promise to volunteer at the school for \_\_\_\_\_ hours during the year to offset the tuition assistance.

Father's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's Signature \_\_\_\_\_ Date \_\_\_\_\_

**On the back of this sheet, please add any additional information that will help us in our decision-making process.**

All application information must be completed for assistance consideration. **The deadline for all completed forms is May 27, 2022. Do not forget to attach a copy of your most recent tax return (including your adjusted gross income) and any supporting documents.**