



Georgia Christian Schools Scholarship Fund
Scholarship Application 2010-2011

Student Name: Last First Middle 2010-2011 Grade

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Check this box and sign below if the student is currently enrolled at Community Christian School (Please disregard the parental information).

Check this box and fully complete the form below if the student is NOT currently enrolled at Community Christian School.

Please check all that apply: Parents Married Parents Separated Parents Divorced Father Deceased Mother Deceased

Student lives with: Both Parents Father Mother Other

Financially Responsible: Both Parents Father Mother Other

Father/Guardian

Mother/Guardian

Name

Name

Relationship to applicant

Relationship to applicant

Address

Address

Home Phone

Home Phone

Cell Phone

Cell Phone

Email

Email

Occupation

Occupation

Employer

Employer

Work Address

Work Address

Work Phone

Work Phone

If applicable, please attach a summary of special circumstances that should be used in consideration of your application.

To the best of my knowledge, the information in this application is true and accurate. The applicant desires to be a student at CCS and to apply for a partial financial scholarship through the Georgia Christian Schools Scholarship Fund. I also understand that currently only students enrolled in Pre-K4, Kindergarten, and transferring in from public schools are eligible to receive funds from GCSSF.

Signature of Parent

Date

Signature of Parent

Date

Community Christian School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and local programs, and athletic and other school-administered programs.