



Mount Ellis Elementary

A Seventh-day Adventist Christian School
3835 Bozeman Trail Road ◦ Bozeman, MT ◦ 59715 ◦ (406) 587-5430

Tuition Assistance Application

As a private school, Mount Ellis Elementary operates on a student fees, generous donor support, and subsidies from the Seventh-day Adventist Church. Because of this amazing support, our school tuition is significantly lower than the real cost of education. However, we do have tuition assistance and support for situations to help out with financial needs when necessary.

The church and school boards will review the requested information and determine the amount of tuition assistance they are able to subsidize. All information will be held in strict confidence. We will make all efforts to assist your tuition needs. If you are not a church member, please contact our school treasurer Kristi Rich at (406)451-1299 or Kristi_geraci@hotmail.com with any questions or concerns.

Please complete the application and return it with your registration paperwork.

Assistance is only available for tuition. The yearly registration fee and any extra fees throughout the year (Ski PE, outdoor school, yearbook, after school care, etc.) are not part of the tuition assistance. Please take into account these extra fees when determining how much tuition you can pay per month. The registration fee can be spread out over 10 months if needed.

Party Responsible for Account:

Address:

Street	City	State	Zip
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Student Information

Name:

First	M.I	Last	Grade
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Name:

First	M.I	Last	Grade
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Name:

First	M.I	Last	Grade
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Name:

First	M.I	Last	Grade
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Family Support (circle the answer as requested)

Father lives at home YES / NO and contributes to the family income YES / NO

Mother lives at home YES / NO and contributes to the family income YES / NO

Number of children in the family (circle) 1 2 3 4 5 6

How much tuition (not counting extra fees) do you feel you can pay on a monthly basis? _____

Monthly Tuition Assistance Amount Requested: _____

Monthly Income

Please provide your best estimate of your monthly income: _____

Monthly Expenses

Please provide your best estimate of the monthly expenses for the following:

Charities _____

Housing (mortgage, rent, utilities, trash pick-up, etc.) _____

Auto (payments, gas and insurance) _____

School (not including Mount Ellis Elementary) _____

Any other factors that you would like the Committee to consider: _____

I hereby request financial assistance from my home church or the school and grant permission for Mount Ellis Elementary School to release to the above said committee academic and behavioral information about the above named student(s) as well as information about the status of my account at Mount Ellis Elementary School.

Yes No If an individual offers to sponsor or financially assist my child(ren) at Mount Ellis Elementary School, I give permission for the school to release my account balance (not a monthly statement) or the monthly assistance amount that I am requesting.

Signature of Parent/Guardian

Date

Tuition Assistance Committee Action: Boz Church Mt. Ellis Church MEE Other_____

Monthly Amount: \$_____ Notes:_____

Pastor/Church Board Chairman:

School Board Chairman:

School Treasurer:

Committee Meeting Date:
