# Beltsville SDA Church Adventist Academy Tuition Matching Program

Tuition Matching Program for Adventist Secondary Academies School

## 1. Policy Statement (purpose)

Beltsville Seventh-day Adventist Church desires to support its membership by defraying a portion of the cost associated with secondary e.ducation at Takoma Academy, Shenandoah Valley Academy and Spencerville Adventist Academy. To this end, the Beltsville Seventh-day Adventist Church will contribute matching funds for the upcoming scholastic year to the Adventist secondary academy on behalf of each of its qualified students as follows:

Takoma Academy: \$1500 per School Year

Shenandoah Valley Academy: \$1500 per School Year Spencerville Adventist Academy: \$1350 per School Year

### **2. Eligibility Requirements (what is required)** - The following eligibility requirements must be met:

- Student, attending Takoma Academy, Shenandoah Valley Academy or Spencerville Adventist Academy, who:
  - o is in grades 9-12;
  - o maintains good school citizenship; and
  - o maintains a GPA of 2.0 or better.
- Parent, member of Beltsville Seventh-day Adventist Church who:
  - o attends Beltsville Seventh-day Adventist Church regularly;
  - has held membership in Beltsville Seventh-day Adventist Church for at least 12 months, or who is new to the area (Washington Metropolitan) and has applied for membership transfer; and
  - o makes financial contributions to the Beltsville Seventh-day Adventist Church local combined budget
  - o participate in a ministry of the Beltsville Seventh-day Adventist Church

#### 3. Approval Process (how to apply and who approves)

A student and his/her parent(s) shall complete the form supplied by the Beltsville Seventh-day Adventist Church. The application will be reviewed for verification of the eligibility requirements, as listed above. Once the expectations are verified, the application will be sent to the Beltsville SDA Church treasurer for processing.

#### 4. Term and Termination

- The term of this matching program will be in perpetuity until such time as the Beltsville Seventh-day Adventist Church Board elects to discontinue the program. However, an annual application is required to be completed within the guidelines communicated through the church's leadership.
  - A subsidy may be terminated at any time for the following reason(s):
    - o Adverse financial condition of Beltsville Seventh-day Adventist Church
    - o Student or parent fails to remain qualified as stated above in the Eligibility Requirements
    - o At the discretion of the Beltsville Seventh-day Adventist Church Board

First Name		
Last Name		
Email		
Mobile Phone		
Street		
City		
State	Postal Code	
Student Name		
Is Parent a Beltsville Seventh-day Adventi	st Church Member:	
Yes		
☐ No		
Date Joined Beltsville Seventh-day A	Adventist Church	
dary School Attending:		
Takoma Academy		
Shenandoah Valley Academy		
Spencerville Adventist Academy		

Student's GPA\*

Parent/Student Acknowledgment

We understand that this subsidy is being contributed to an Adventist secondary academy to help cover the difference in cost between a constituent rate and a non-constituent rate or lower the overall cost of tuition. We understand that this contribution is being made with the understanding that the student will maintain attendance, grades, and spiritual growth consistent with the goals of Adventist education. We understand that our family is expected to participate actively in the life of Beltsville Seventh-day Adventist Church, including attendance and financial support. We also understand that a designated Beltsville Seventh-day Adventist Church officer may contact the academy to obtain relevant information in support of this application.

I have read and understand the guidelines of the Tuition Matching Program for an Adventist secondary academy and expressly agree to allow the designated Beltsville Seventh-day Adventist Church Officer the right to contact the Adventist academy to obtain the necessary information to qualify for this subsidy program. Please type parent and student names below:

Type your answer.
By checking this box, I am authorizing my digital signature:
☐ Parent
☐ Student