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 Spangle, WA 99031

## FAMILY REQUEST FOR LOCAL CHURCH SUPPORT

**SECTION ONE:** Parents or Guardians, complete section one prior to submitting this request to your local church

**Student Name:** \_\_\_\_\_ **Student Grade:** \_\_\_\_\_

**Student is applying to be:**  Day Student  Extension Student  Part-Time Dorm Student  Full-Time Dorm Student

**Church Member Requesting Support:** \_\_\_\_\_  
 (parent/guardian)

**Church Name:** \_\_\_\_\_ **Church Phone:** \_\_\_\_\_

Note: UCA will match the financial aid provided by a local church, up to a maximum of \$1,500 for day students, \$2,000 for extension students, \$2,500 for part-time dorm students, and \$3,000 for full-time dorm students. Matching scholarships are based on student financial need and the availability of funds.

## CHURCH USE ONLY

**SECTION TWO:** To be completed by Church Pastor, Head Elder, or Church Treasurer

### Local Church Authorization

This certifies that the church board approved a student aid appropriation in the amount of \$ \_\_\_\_\_

Church Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Funds will be remitted to Upper Columbia Academy by:

Monthly Church Support \$ \_\_\_\_\_ (x \_\_\_\_ payments) = Annual Support of \$ \_\_\_\_\_

Semester Payments \$ \_\_\_\_\_ (x 2 payments) = Annual Support of \$ \_\_\_\_\_

One Payment in full of \$ \_\_\_\_\_

Check Enclosed

Please send invoices and statements to our church treasurer

Church Treasurer Name: \_\_\_\_\_

Church Treasurer Email: \_\_\_\_\_

Church Mailing Address: \_\_\_\_\_

**NOTE to Pastor, Head Elder, or Church Treasurer:** Please send the completed form to UCA as soon as the church board has taken the necessary action, including any denied requests. Due to tax laws and conference policy, the church portion of the aid cannot be paid by the parents/guardians or students. Applications for church matching aid are due annually by August 1st.

Many families need extra help beyond our available student aid funds. Thank you for considering this family's request.