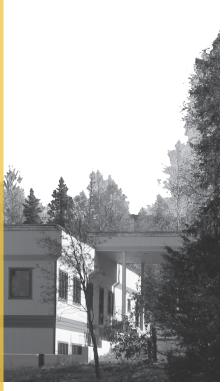
Financial Information to be completed by the parent(s)	
ADJUSTED GROSS INCOME (Attach current IRS tax for	rm) \$
UNTAXED INCOME & BENEFITS (Subsidies, ATAP, Support, e	etc) \$
LAST YEAR'S MEDICAL EXPENSES NOT PAID BY INSURAN	CE \$
ASSETS Ca	ash \$
Savir	ngs \$
Stoc	cks \$
Bon	nds \$
Oth	her \$
NUMBER IN FAMILY ATTENDING SCHOOL	OL \$
TOTAL MONTHLY PAYMENTS FOR EDUCATIONAL COS	\$ \$
PERMANENT FUND DIVIDENDS AVAILABLE FOR SCHOOL BI	ILL \$
AMOUNT REQUESTI	ED \$
PARENT(S) PLANNED MONTHLY PAYMENT	NT \$
PARENT(S) PLANNED TOTAL FOR THE SCHOOL YEAR	AR \$
Committment Statement to be completed by the student & financially responsible parent(s) We, the undersigned, understand that continuation of assistance depends on the student's strong desire to gain a Christian education and their willingness to obey school regulations in action and spirit. The student will faithfully perform their work duties assigned by the school. If negligent in any of these areas, further assistance may be terminated or extended at the discretion of the K-12 Board of Education. STUDENTS SIGNATURE DATE	
PERSON FINANCIALLY RESPONSIBLE SIGNATURE	DATE
Church Committment to be completed by the church pastor and treasurer	
The Church has voted to assist the student	
listed on this application in the amount of \$ per semester for the	
20 20 school year.	
Church Treasurer's Signature	Date
Church Pastor's Signature	Date





Funding provided in part by:

- Alaska Sonshine Ministries Endowment Earnings
- Sherburne Smith Matured Trus

ASAF APPLICATION PROCESS

• Student completes the **Student Application** section.

2 Parent(s) complete the

- Family and Financial Information sections, signs the Committment Statement and gives the application to local church pastor with all requested
- The local church board considers the application, completes the **Church Commitment** section and returns it to the pastor or head elder.
- The pastor (or head elder) gives the family a copy of the application, sending the original to the Alaska Conference Office of Education along with a check made payable to the Alaska Conference for the match amount.

Alaska Student Assistance Fund

The Alaska Student Assistance Fund (ASAF) is designated to assist Alaskans in meeting their tuition expenses at a Seventh-day Adventist (SDA) academy **outside of Alaska**. ASAF will match the amount given by a local church (up to \$500 per semester) to aid a specific student. Funds will be applied to the student's account on a semester basis; churches may choose to send both terms in at once.

The application should be received at the Alaska Conference of Education as early as possible to insure adequate consideration. At any time, if there are more requests than available funds, the distribution will be on a proportionate basis.

It is recommended that parent(s) and the student be members of the local SDA church, in good and regular standing, and be tithe payers.

Applications will be considered only if fully complete with all requested documentation and matching funds.

The conference will combine church monies with conference matching funds and send the money direct to the school.

Deadlines

- Applications received after October 30 will be considered for the spring term.
- Applications received after March 30 will be considered for the following fall term.





Alaska Conference of Seventh-day Adventists Office of Education

ASAF MATCHING REQUEST APPLICATION

Student Information to be completed by the student STUDENT NAME MAILING ADDRESS PHONE EMAIL DATE OF BIRTH GRADE ENTERING SCHOOL TO WHICH YOU ARE APPLYING **ADDRESS** CITY, STATE, ZIP PHONE **Family Information** *to be completed by the parent(s)* FATHER'S NAME MAILING ADDRESS PHONE EMAIL MOTHER'S NAME **ADDRESS** PHONE FMAII NAMES AND AGES OF DEPENDENT CHILDREN REASON FOR REQUESTING ASSISTANCE (Be Specific)

OFFICE USE ONLY Date Received:

Term Considered: ☐ FALL ☐ SPRING 20_