

## **ALETHEIA CHRISTIAN ACADEMY**

PO BOX 37 • 42457 171<sup>ST</sup> AVE HOLDINGFORD, MN56340 P: 320-746-0005

## **SCHOLARSHIP APPLICATION**

Due to generous donations, Aletheia Christian Academy is able to offer scholarships to help some families cover some of the cost of tuition. Please complete this application and return it to the school office or Administrator.

Parent	/Guardian (applicant) name and ad	dress:			
Name Address City, State, Zip Phone Number		Nam	Name		
		City,	City, State, Zip		
		Phor			
Child(r	en)'s name(s) and the grade they a	are entering:			
Name	Gra	nde Nam	e	Grade	
Name	Gra	nde Nam	e	Grade	
Please	e explain your need for a scholarshi	p.			
				<del></del>	
	rstand that scholarship amounts wil rstand that scholarships typically do		_	istances.	
				amount and the cost of tuition, as well	
as any	fees.				
	Applicant Signature	 Date			
	Applicant Signature	 Date	<del></del>		