

Education Allowance Application

(P S O R \ H H V

School Year: _____

Parent: _____

Date: _____

Address: _____

Phone: _____

E-mail: _____

I hereby apply for education allowance for the following dependent child(ren):

STUDENT'S NAME	DOB	GRADE	DENOMINATIONAL SCHOOL ATTENDING

My Spouse is Denominationally Employed by:

Employee's Signature: _____

According to the General Conference Education Allowance Policy, employees, if eligible, may apply for education allowance for their unmarried dependent children. Fill in the requested information above and return this application to the Northern California Conference Office as soon as possible.

NOTES:

Education Allowance payments are sent to the school after we have received your application and notification from the school listing your child(ren) as being in attendance.

Day students receive 35% of tuition and required fees. Dormitory students receive 70% of tuition and required fees.

Payment is made to elementary schools and academies upon receipt of invoice from school.

Payment is made to colleges upon receipt of invoice from school.

Submit form to **andrea.vavrik** @nccsda.com

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