



LYNDON ACADEMY

Lyndon Academy Need Based Financial Aid Policy & Application

Criteria for Eligibility: Gross household income is the determining factor for the level of financial assistance. Lyndon Academy does not discriminate on the basis of race, color, gender, religion, national or ethnic origin.

Gross Household Income Definition: Gross household income includes, but is not limited to taxable income, foreign income, trust funds established for students, alimony payments received, and child support payments received.

Process:

1. Applicants must complete and deliver all necessary paperwork to the attention of:

Peter Murdock
Lyndon Academy
485 Toonigh Road
Holly Springs, GA 30188
Fax: 770-874-8686
Email: pmurdock@lyndonacademy.org

2. An evaluation of your financial aid will be provided to you within a week. After consideration of your financial gift, we encourage you to take the next step in applying to Lyndon Academy.
3. Financial assistance is limited and awarded on a first come - first served basis. "First come - first served" is determined based on the time of enrollment at Lyndon Academy.
4. Proof of income will need to be provided and verified each year to maintain the financial assistance.

If my application for financial assistance is approved, I, _____, understand that I must upon acceptance sign an Enrollment Agreement and pay the required funds to secure my child's seat and financial aid offer.

Sign

Date

I acknowledge that I have read the entire Lyndon Academy Financial Aid Policy and agree to the terms and conditions of the policy.

Sign

Date



LYNDON ACADEMY

LYNDON ACADEMY FINANCIAL AID APPLICATION

We encourage you to submit your application with all other required documentation as soon as possible. Please note that applicants may not secure financial aid until the admission process is complete.

All applicants must submit the following:

- Completed LYNDON ACADEMY FINANCIAL AID APPLICATION form
- Copy of most recent Federal Tax Filing

Grade Applying for: _____ School-year Intending to Enroll: _____

Applicant's Name (Guardian of student): _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

Email: _____

2017 Estimated U.S. Gross Reported Household Income: \$ _____

2017 Estimated Total Amount of External Money Received
(include foreign income, trust funds established for student, alimony, child support, etc): \$ _____

The undersigned attests that the information provided is accurate and true. The undersigned also understands that any FALSE statement in this application for the purpose of seeking financial assistance will subject the applicant to dismissal from Lyndon Academy and a loss of funds.

Applicant's Signature: _____ Date: _____

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