



Christian International School of Prague

Growing in Wisdom, Walking in Integrity

—Proverbs 2:6-7

Dear Parent/Guardian:

We are pleased to inform you that we are able to offer limited scholarships for the 2021-2022 school year to families who demonstrate a genuine financial need based on information provided in the attached Scholarship Application. The scholarship will never be more than 60% of the tuition (the average distribution percentage last year for families who qualified was 12% per student) and the actual amount will also be determined by the level of scholarship funds available. The scholarship will be applied towards tuition costs only and does not affect other programs offered by CISP such as ELL, AP and Discovery.

You may submit a scholarship application IF you meet one of the following criteria:

1. You are a current student/family attending CISP.
2. You are a new student/family who has received an official Enrollment Offer Letter from CISP.

Please note that scholarship applications will not be considered until current families have completed Re-enrollment and new families have completed the entire Admissions process AND been accepted to CISP.

You may submit your application in the office at CISP, or by scanning and attaching it to an email addressed to finance@cisprague.org. Please use **“CONFIDENTIAL Scholarship Application”** as the subject line. We will honor your desire to keep this information strictly confidential and in compliance with GDPR requirements. A system is in place where only one person will identify names with requested information.

Accurate and complete information is required in order to make a fair assessment of the amount of financial aid needed. Please take the time to fill out the entire form and return it. If the form is not completed in its entirety, it may not be considered in the award process.

The award is made for the entire school year. It will be included on your payment schedule after the scholarship, finance, (re)-enrollment process is finished and the information is communicated to the finance department. Please let us know if your child plans to attend CISP for less than the full school year. We reserve the right to reduce or eliminate your scholarship award:

1. If for any reason you unexpectedly withdraw during the school year.
2. Due to submission of inaccurate or incomplete data.
3. If the student(s) are placed under academic probation or a behavioral management plan during the academic year.
4. If the family is unable to maintain the current contract payment schedule.

We are pleased to offer this opportunity again this year and look forward to seeing how the Lord will supply. You are always invited to write a thank you letter to donors if your child receives a scholarship.

Sincerely,

The CISP Board

If you have questions, contact the Finance Department at the CISP office (+420272730091) or by email (finance@cisprague.org).

Scholarship Application 2021-2022 School Year

Please fill out the ENTIRE application – put N/A if it doesn't apply or 0. The deadline for submitting the application is **31 May 2021**. Bring or mail applications to CISP or send to finance@cisprague.org. Later applications may be accepted, although scholarship funds may already be depleted.

1. FAMILY INFORMATION

Family name _____ Parent(s) first name(s) _____

Local Address _____

Mobile Phone _____ Email address _____

Home Phone _____ Employer/Business _____

List all dependent children (including children not attending CISP):

Name	Current Grade	Current Age	Plans to attend CISP for the school year	School Last Attended	Annual Tuition Paid

2. TUITION INFORMATION

Total family tuition expected for 2021-2022 year at CISP _____ CZK

Total family tuition paid for 2020-2021 year at CISP _____ CZK

Previous scholarship(s) received: yes/no ___ Amount _____ CZK Year(s) _____

List any other sources that help pay your tuition (relatives, church, friends, business, supporters).

3. INCOME INFORMATION

Fill in all blanks, even if the answer is 0. All financial information is to be provided in CZK.

Monthly family income for 2020 _____ CZK /month

Note: Monthly income includes salaries, private tutoring income, rental, gifts/donations, business income, and share dividends received during the year for the household.

Expected family income for 2021 _____ CZK /month

Note: If it is lower than the previous year please explain.

4. HOUSING

How much do you pay for utilities each month? _____ CZK/month

Please circle one: We RENT / OWN an apartment/home in CR

If you RENT in CR: Total monthly housing cost _____ CZK/month

Portion of housing paid by business/mission agency _____

If you OWN your apartment/home:

Monthly loan payments? (principle & interest) _____ CZK/month

What is the current value of your apartment/house? _____ CZK

5. FINANCIAL ASSETS

Bank Account Balance as of 31 December 2020 _____ CZK

Stocks, Bonds, CDs or other financial assets valued at 31 December 2020 _____ CZK

Do you own a car? _____ If so, what type? _____ Current Value: _____ CZK

Do you own a home in your home country? _____ Current Value _____ CZK

6. SUMMARY

Total monthly family income: _____ CZK

Less total monthly family housing expenses: _____ CZK

Equals total available for other expenses: _____ CZK

State below any temporary circumstances that make paying tuition particularly difficult this year:

7. ATTACHMENTS

_____ Attach documentation of finances. **For US Citizens:** A copy of your LAST YEAR Form 1040. **For Non-US Citizens:** Attach a copy of your most recent tax form from your country or a statement why this is not provided. If a tax form is not provided, you must send a letter from your business or employer stating monthly income and income after taxes are withheld i.e. take home pay.

REMINDER: Scholarship is based on need, and will be 0% to maximum 60% of the tuition.

SIGNATURE: I have attached income tax return/financial statement documents and affirm that they are true and correct. I affirm that statements on this application are true and correct. A scholarship is requested for the benefit of the CISP student(s) named above.

Signature of Parent/Guardian

Date

For office use only

Scholarship request: Date received _____ Amount of scholarship granted _____ CZK

Signature of Scholarship Committee Chair _____ Date _____

Initials of Business Office _____ Date _____

Letter of award sent to parents by _____ Date _____