

JUBILEE CHRISTIAN ACADEMY

25 Doña Hemady Ave. cor 3rd St.
New Manila, Quezon City
Tel. Nos: 8294-0853 to 55

www.jca.edu.ph

1603-1607 E. Rodriguez, Sr. Ave.
Cubao, Quezon City
Tel. Nos.:8294-0843 to 45

STUDENT FUND PROGRAM

ASSISTANCE: () High School Assistance () IPAD () Study Tour

GRANT: () Alumni Children Grant () Full time Christian Ministry Children Grant
() JEC Pastoral Children Grant

DONOR ASSISTANCE: () CKB

1. Student Information:

English Name: _____ Chinese _____
Level: _____ Section: _____
General Average: _____ Conduct: _____
Other Assistance / Scholarship Received: _____

2. Parent / Guardian Information shall be treated confidentially:

Person Information	Father / Guardian	Mother / Guardian		
English Name				
Chinese Name				
If JCA alumnus, batch year				
Email Address				
Residence Address				
Contact Numbers				
Profession / Company / Position				
Professional Address				
Professional Contact Numbers				
Annual Income				
Taxable Income	<input type="checkbox"/> Non-filing <input type="checkbox"/> Taxable Income _____	<input type="checkbox"/> Non-filing <input type="checkbox"/> Taxable Income _____		
Residence	<input type="checkbox"/> Owned by you <input type="checkbox"/> Free rental <input type="checkbox"/> Rental Amount _____ <input type="checkbox"/> If mortgaged, monthly amortization _____	<input type="checkbox"/> Owned by you <input type="checkbox"/> Free rental <input type="checkbox"/> Rental Amount _____ <input type="checkbox"/> If mortgage, monthly amortization _____		
Dependents	Name	Birthdate	School	Level

* I hereby certify that the information and documents submitted are true and accurate. Should they be discovered as misleading or wrong, the School shall cancel current and future assistance application.

Father / Guardian / Date

Mother / Guardian / Date