



Mentoring Academics Computers Healthy Recreation
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1850 Chester Avenue Augusta, Georgia 30906
706.796.5046

Limited tuition assistance funding is available based on financial need. Complete this tuition assistance application and return to Helen Thomas-Pope.

A separate form must be completed must be completed for each family.

Parent/Guardian must submit copies of household income verification. This information can include one or more of the following: PAYSTUBS (weekly, bi-weekly, monthly), SOCIAL SECURITY AWARD LETTER, UNEMPLOYMENT, OR ANY OTHER DOCUMENTATION VERIFYING MONTHLY INCOME.

All households will pay a minimum of \$25/month for fees.

HEAD OF HOUSEHOLD NAME:

CO-HEAD OF HOUSEHOLD NAME:

FEMALE HEAD OF HOUSEHOLD (check for YES)

ANNUAL HOUSEHOLD INCOME:

NAME(S) OF ALL MINORS UNDER THE AGE OF 15 YEARS IN HOUSEHOLD:

NAME(S) OF ALL MINORS UNDER THE AGE OF 18 YEARS IN HOUSEHOLD:

NAME(S) OF ALL FULLTIME COLLEGE STUDENTS AGE 18 YEARS AND OVER IN HOUSEHOLD:

NAME(S) OF ALL HOUSEHOLD MEMBERS AGE 62 YEARS OR OLDER:

NAME(S) OF ALL PERSONS (OF ANY AGE) WITH DISABILITIES IN HOUSEHOLD:

NAME(S) OF ALL CHILDREN PARTICIPATING IN PROGRAM:

STREET ADDRESS:

APT/UNIT:

CITY, STATE:

ZIPCODE:

CELL NUMBER:

WORK NUMBER:

EMAIL:

PARENT/GUARDIAN(S) SIGNATURE:

DATE: MM/DD/YYYY

FOR OFFICE USE ONLY:

TUITION AMOUNT GRANTED:

FEE AMOUNT DUE PER MONTH:

\$ _____

\$ _____

DATE NOTIFIED: _____