

REQUEST FOR CHURCH SCHOOL SUBSIDY

(Submit to the Pastor or drop in the Offering Bag)

Student Name: 1. _____ Grade: _____ School: _____

Student Name: 2. _____ Grade: _____ School: _____

Student Name: 3. _____ Grade: _____ School: _____

Parent(s)' Declaration

As faithful members of the Southern Asian Seventh-day Adventist Church supporting it's ministries with our tithes and offerings, I/We request that school subsidy be granted for my/our child/children for the school year 2016/2017.

Parent (s) Name: _____

Signature: _____ Date: _____

For Office Use
Committee Action No. _____ Date: _____

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