



NORTH DALLAS ADVENTIST ACADEMY

Church Partnership Scholarship Commitment Form (For SDA and non-SDA churches offering student support)

Confidential Support Confirmation for Student Tuition

Student Name: _____ **Grade:** _____

Parent/Guardian Name(s): _____

Phone Number: _____ **Email:** _____

TO BE COMPLETED BY A CHURCH OFFICIAL (PASTOR, TREASURER, OR DESIGNATED REPRESENTATIVE):

Our church affirms that the student named above is associated with our congregation and we commit to partnering with the family by contributing the following amount toward their tuition at North Dallas Adventist Academy for the _____ school year.

Church Name: _____

Denomination: _____

Church Address: _____

Phone: _____ **Email:** _____

Authorized Representative (Print): _____

Church Title or Position: _____

Signature: _____ **Date:** _____

\$ Amount to be contributed: \$ _____ per month / semester / year

(Please circle or indicate frequency of support)

Preferred method of payment:

- Direct to school via check
- Zelle to: aguilerar@ndaacademy.org
- ACH: International SWIFT Code: CHASUS33 | Account Number: 000000786040378
Routing Number: 111000614

This form is used by NDAA to facilitate partnerships between families and their churches in a collaborative effort to support Christian education.