

**Scholarships for Kids
2022-2023 Scholarship Application**

All applications should be submitted to the participating school your child plans to attend for the 2022-2023 academic year.

SCHOOL: Please use the checklist below to confirm all requested and necessary documentation has been provided. Requested documentation is mandatory for the application to be considered complete.

Parent responsibility amounts (PER STUDENT):
\$500 - K-12th grade

Group A: Last income check 21/22-First Scholarship 21/22
Group B: Last income check 20/21
Group C: First-time applicants

**GROUP A - Renewal - No income check
Due to participating school by March 10th**

This renewal application packet includes:

- ____ Application
- ____ Applicant's LATEST report card
- ____ Written verification of assigned school from the applicable city or county school board office

* Failure to provide a fully completed application by the deadline may result in denial of the application.

* Parents may request a copy of this completed coversheet for confirmation of submission.

2022-2023 INCOME ELIGIBILITY GUIDELINES - RENEWAL APPLICANTS

2 - \$47,905	6 - \$97,845
3 - \$60,390	7 - \$110,330
4 - \$72,875	8 - \$122,815
5 - \$85,360	

Scholarship limits:	
\$6,000	K-5th
\$8,000	6th-8th
\$10,000	9th-12th

Do not submit this page with the application.

FOR SCHOOL USE

Submitted by: _____ (Initials)

Date: _____

2022/2023 assigned school: _____

ZONED FAILING ZONED NON-FAILING

STUDENT NAME:

STUDENT ID:

Ethnicity: _____

Sex: Male Female

Birthdate: _____ Age: _____

Social Security #: _____

PLEASE PROVIDE CONTACT INFORMATION FOR BOTH PARENTS.

*IF THE CHILD LIVES WITH A GUARDIAN OR IS A WARD OF THE STATE, DOCUMENTATION
MUST BE PROVIDED.*

APPLICANT'S ADDRESS:	With whom does the child reside? (circle one)	
	PARENT(S)	GUARDIAN(S)
PARENT/GUARDIAN #1 NAME:	PARENT/GUARDIAN #2 NAME:	
ADDRESS:	ADDRESS: Same? _____	
PHONE:	PHONE:	
EMAIL:	EMAIL:	

GRADE FOR 2022/2023 : K5 1 2 3 4 5 6 7 8 9 10 11 12

Is the applicant a previous SFK scholarship recipient? If YES, check ALL academic years that apply.

Yes 13/14 14/15 15/16 16/17 17/18

No 18/19 19/20 20/21 21/22

Has the applicant received a scholarship from another SGO? If YES, check ALL years that apply.

Yes 13/14 14/15 15/16 16/17 17/18

No 18/19 19/20 20/21 21/22

TOTAL number of years receiving a scholarship, including the 22/23 academic year. _____ (ALL SGO's)

Is student receiving accommodations for a learning disability: No Yes

Does the student have limited English language proficiency: No Yes

Has the student ever repeated a grade: No Yes Not sure

If so, what grade(s)? K5 1 2 3 4 5 6 7 8 9 10 11 12

What school(s) did the student attend during the 21/22 academic year? Check ALL that apply.

Public Failing: _____ from: _____ to _____

Public Non-Failing: _____ from: _____ to _____

Homeschool: _____ from: _____ to _____

Non-Public: _____ from: _____ to _____

Pre-K: _____ from: _____ to _____

Has the student been on academic probation in the past year: No Yes

TUITION VERIFICATION - To be completed by school accepting the applicant.

Tuition rate <u>prior to</u> discounts/subsidies:	Discounts and subsidies:
\$	\$
\$	\$
List all mandatory fees:	
\$	\$
\$	\$
Cost of standardized testing:	Family responsibility: (\$500 minimum per child required)
\$	\$
Other financial assistance:	
\$	

SCHOOL CERTIFICATION

I certify that the information provided on this scholarship application, including, but not limited to, the tuition verification and the family size and income statement, is true, correct, accurate and complete to the best of my knowledge. I recognize that eligibility determination is exclusively the responsibility of the Scholarship Granting Organization.

I certify that the tuition, fee, family responsibility and additional scholarship/financial assistance amounts provided are true, correct, accurate and a complete acknowledgement of the participating school's current published rates and subsidies. I understand that maximum scholarship amounts and family responsibility amounts are subject to change at the discretion of the Scholarships for Kids and are dependent on funding available for the academic year.

School representative:

Date:

PARENT/GUARDIAN CERTIFICATION

I certify the information and documentation provided as part of this Scholarship Application, which may include previous school information and family size and income information is true, correct, accurate and complete. I recognize that eligibility determination is exclusively the responsibility of Scholarships for Kids. I understand that maximum scholarship amounts and minimum family responsibility amounts are subject to change and are dependent on funding available for the academic year. If I am not providing a Form 1040 or tax return transcript, then I certify that neither I, nor my spouse, filed a state or federal income tax return for 2021.

Media release: I give my consent for my child's name, image, photograph, video, audio, or other form of recording of my child to be used in any and all print materials, videos, and/or any other media venues for the promotion of this school and/or for organizations that help support the mission of the school or provide scholarships for students at this school. Yes No

Parent/Guardian Name:

Signature:

Date:

Parents should ensure:

1. All pages of the application are completed in full.
2. Minimum parent responsibility amounts (PER STUDENT):
\$500 - K-12th grade
3. All other requested documents are included with the application:
Report Card, Verification/Written Confirmation of Assigned School
4. SGO Transfers ONLY must include confirmation of a scholarship during the 2021-2022 academic year.