**Confidential Application for Pre-Kindergarten Scholarships**

**Description and Criteria**

This document is to be used by students and their parents to apply for the PathWays Foundation of Southwestern PA Pre-Kindergarten Scholarship.

**Application Guidelines:**

The PathWays Foundation Pre-Kindergarten Scholarship is for children between the ages of three and six years of age who are:

1. Residents of Washington or Greene County, Pennsylvania
2. Registered/enrolled/attending an approved Pre-Kindergarten program; and,
3. Live in a household with a household income of less than $90,000 annually, plus $15,842 for each dependent child (see Age and Income Eligibility Criteria on next page for more information.)

Please note: The Pre-K scholarship does not pay for childcare before or after the pre-school hours.

**Application Submission:**

The application form must be accompanied by a copy of the most recent, signed, IRS Federal Tax Return for all wage-earning adults residing in the household, or it will be considered incomplete. We do NOT accept pay stubs, W-2 Forms, state tax return forms or local tax return forms.

Return the completed application and attachments to PathWays Foundation, 95 W. Beau Street, Suite 420, Washington, PA 15301. Applications must be mailed or hand delivered; faxed or emailed applications will not be accepted.

Applications MUST be RECEIVED no later than 4:00 PM on:

Round 1: Received August 20 for academic year scholarship (September – May)

Round 2: Received January 8 for new applicants (January – May), *if we have available funds*

Round 3: Received March 20 for new applicants (April – May), *if we have available funds*

If the deadline falls on a weekend or holiday, applications may be received the next business day.

All applications must be received by 4pm on the deadline date.

Applications that are incomplete, do not meet the eligibility criteria, and/or are received past the deadline date will not be considered.

PathWays Foundation is not responsible for lost, missing, misdirected, or late applications/supplemental information.

**Scholarship Award:**

Parents will receive a letter confirming receipt of the application and eligibility status of the application. Scholarship decisions will not be announced until the end of following months: September for Round 1, January for Round 2, March for Round 3.

All scholarship awards are paid to the approved Pre-Kindergarten program on behalf of the student and should be credited by the school to the student’s account on a monthly basis. Scholarship awards may not exceed the actual amount of tuition charged by the program, including other scholarships or tuition assistance for the child; nor shall the scholarship exceed the amount of tuition charged to non-scholarship students.

Should the student leave the Pre-Kindergarten program before the end of the program year, the parent/guardian and school must notify PathWays Foundation and the remainder of the scholarship must be reimbursed to PathWays Foundation by the school.

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**Description and Criteria**

**Age and Income Eligibility Criteria:**

An eligible student is at least three years of age, registered/enrolled in and/or attending an approved pre-kindergarten/preschool program, and is a member of a household with an annual household income of not more than $90,000, except that an additional income allowance of $15,842 is permitted for the student and for each other dependent (as defined by the IRS) living within the same household.

Verification of Income Eligibility Information is required for all adult wage earned residing in the household, this includes grandparents or other adults living in the house, even if their income is not used for the child.

In calculating household income for the purpose of determining student eligibility, you must include all monies and property received of whatever nature and from whatever source, except for the following:

1. Periodic payments for sickness and disability other than regular wages received during a period of sickness or disability.
2. Disability, retirement or other payments arising under workers' compensation acts, occupational disease acts and similar legislation by any government.
3. Payments commonly recognized as old age or retirement benefits paid to persons retired from service after reaching a specific age or after a stated period of employment.
4. Payments commonly known as public assistance or unemployment compensation payments by a governmental agency.
5. Payments to reimburse actual expenses.
6. Payments made by employers or labor unions for programs covering hospitalization, sickness, disability or death, supplemental unemployment benefits, strike benefits, social security and retirement.
7. Compensation received by United States servicemen/women serving in a combat zone.

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| **Income Eligibility for EITC Scholarships** |
| **Number of Dependent Children in Household** | **Maximum Income to be Eligible** |
| 1 Child | $105,842 |
| 2 Children | $121,684 |
| 3 Children | $137,526 |
| 4 Children | $153,368 |
| 5 Children | $169,210 |
| For each additional dependent child add $15,842 |  |

**Confidential Application for Pre-Kindergarten/Preschool Scholarships**

**1. Primary Parent(s) or Legal Guardian(s) residing with student (and primary custodian)**

**Name (Please print neatly):**

**Circle one:** Father Mother Stepfather Stepmother Other (specify)

**Name (Please print neatly):**

**Circle one:** Father Mother Stepfather Stepmother Other (specify)

**2. Primary Parent/Legal Guardian Contact Information (Please print neatly):**

Street Address: City State Zip

Mailing Address (if different from Street Address): City State Zip

County: Home Phone: Work Phone:

Other Phone: Email:

**3. Child(ren) Attending Pre-Kindergarten and Applying for a Scholarship (Please print neatly:)**

**Child 1**:

 Full Name (First, MI, Last) Age Birth date

Name of Pre-Kindergarten/Preschool enrolled:

Start date Number of Days/week Number hours per day:

Are you receiving childcare assistance from Child Care Works (CCW)? \_ Yes \_ No

**Child 2:**

 Full Name (First, MI, Last) Age Birth date

Name of Pre-Kindergarten/Preschool enrolled:

Start date Number of Days/week Number hours per day:

Are you receiving childcare assistance from Child Care Works (CCW)? \_ Yes \_ No

**(List any additional children requesting Pre-K Scholarship assistance on a separate sheet.)**

4. List the name and relationship of everyone living in the house/household as the applicant. Include yourself and all individuals listed above and other persons whether or not they are related by blood or marriage. MUST provide current custody order for children involved in partial custody/visitation.

**Name Relationship to parent/guardian Age M/F Dependent**

 \_\_\_\_ \_\_\_\_ Yes No

 \_\_\_\_ \_\_\_\_ Yes No

 \_\_\_\_ \_\_\_\_ Yes No

 \_\_\_\_ \_\_\_\_ Yes No

**For additional household members, please continue on a separate sheet.**

**5.** Attach a complete photocopy of the most recent Federal IRS Tax Return - Form 1040, 1040A, or 1040EZ (as signed and filed with the IRS, including all Schedules) Forms for ALL wage-earning adults residing with the applicant(s). If you do not file an IRS Form 1040 and receive only non-taxable income, please submit documentation/verification of your non-taxable income. (This is required for acceptance of this application.)

**6. Signature of Parent(s) or Legal Guardian(s).** I certify that all information on this form, as well as all supporting documentation, is true, correct, and complete to the best of my/our knowledge and that ALL household income has been reported. I understand that deliberate misrepresentation of this information may result in the scholarship being denied or revoked, and any payments made by CFGC must be reimbursed. I do hereby consent for CFGC to contact my child's school to verify enrollment, tuition, attendance and other information pertinent to this application

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Signature of Legal Guardian and/or Primary Parent Date Printed Name

**PathWays Foundation of Southwestern PA**

 **EITC Pre-K Scholarship Program – Policy and Procedures**

1. The amount of scholarship paid for any individual student shall not exceed the actual stated tuition and fees charged by the school. Nor shall the EITC Scholarship paid exceed the tuition and fees applied to the student’s account, including any other scholarships or payments (including CCW payments) made on behalf of the student. Tuition for scholarship students may not be more or less than that of non-scholarship students receiving comparable services. The school is responsible to provide PathWays Foundation with the eligible tuition amount for each student. Eligible Pre-K programs may not exceed 6 hours/day, 5 days/week, September thru May. Children MUST be registered, enrolled, and/or attending the Pre-K program at the time application is submitted to PathWays Foundation.
2. The amount of the scholarship shall not cover childcare services before or after the stated pre-kindergarten hours.
3. The scholarship will be paid directly to the school on behalf of the student. The family shall not receive any direct cash benefit from the scholarship.
4. Scholarships will be issued to the school after September 30, January 31, or March 31 and only following PathWays Foundation’s receipt of the signed Scholarship Accountability and Reimbursement Agreement Form from the Pre-K program.
5. The school must credit the scholarship to the student’s account on a pro-rated monthly basis.
6. The school and parent/guardian must notify PathWays Foundation immediately if a student withdraws or is removed from the school, or otherwise becomes ineligible for an EITC scholarship.
7. Scholarship funds for students who withdraw or are removed from the school, or become ineligible for the scholarship prior to the end of the school year must be refunded to the PathWays Foundation of Southwestern PA by the school within 30 days following the date of withdrawal, removal or determination of ineligibility of the student(s). The scholarship reimbursement shall be pro-rated based on the amount of time remaining for the school term.
8. Acceptance of this scholarship does not exempt the family or student from abiding by the policies of the school and the school has the right to remove a child from the program at any time for failure to abide by their policies.
9. EITC Scholarship funds may not be used to hold a space open for a student who is not actively attending classes. Exceptions for extended illness or medical absences may be made by contacting PathWays Foundation as soon as it is determined that the extended absence is necessary. Proof of illness or medical excuse may be required for approval of the exception.
10. Selection for scholarship shall be determined without regard to race, gender, religion, or similar characteristics of the applicants. Scholarship amounts are based on a sliding income scale as determined by the PathWays Foundation Grantmaking Committee as well as upon the availability of funds and the number of eligible applicants.
11. All application information must be fully completed and submitted on time by the applicant in order for the application to be considered, including the Application Form and a copy of the most recent Federal Income Tax Return, and submitted according to the application deadline policy.
12. PathWays Foundation is not responsible for lost, missing, misdirected, or late applications or supplemental information.
13. All application information will be maintained by PathWays Foundation in the strictest confidentiality, including income information.

**By signing this form, we agree to abide by the EITC Pre-K Scholarship Policies and Procedures. Further, we acknowledge that failure to abide by these policies and procedures may result in the student’s removal from the ETIC Pre-K scholarship program and that the parent/guardian will be held responsible for any monies owed to the school.**

**Signature –Parent/Guardian Date**

**Printed Parent/Guardian Name Please Print Child(rens) Name(s)**

THIS FORM MUST BE RETURNED WITH THE APPLICATION.

PLEASE KEEP A COPY OF THIS POLICY FOR YOUR REFERENCE.

**PUBLICITY WAIVER**

I hereby grant to the PathWays Foundation of Southwestern PA, its successors and assigns and those acting under its authority, and those for whom it is acting, the absolute right, for as often as it may elect, to copyright and/or use and/or publish any, notes, interviews, stories, and/or media pictures of me or in which I may be included in whole or in part, or in conjunction with my own or a fictitious name, or reproductions thereof in color or otherwise, made through any media for art, advertising, trade, or any other lawful purpose whatsoever.

I hereby waive any right that I may have to inspect and/or approve the finished product or the advertising copy that may be applied. I understand that under no circumstances shall I have any right to maintain any cause against the PathWays Foundation of Southwestern PA, or anyone else by virtue of the terms of this agreement, or anything done pursuant hereto.

Printed Name Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child(ren)’s Names

If the person photographed or videotaped is a minor, parent or guardian must sign below. The undersigned hereby consents to the foregoing and warrants that he has the authority to give such consent.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Parent or Guardian)

NOTE: Please be sure to list children’s names so we know who we have consent for. Children’s names will not be used in publications. Pictures may be used in various PathWays publications and outreach including, but not limited to: Annual Reports, brochures, the PathWays website, newspaper articles and reports to the donors of the Scholarship monies.