

Apple Playschools
Family Scholarship Application
2020-2021

PERSONAL FINANCIAL STATEMENT

Separate applications must be completed for each child.

CONTACT INFORMATION

Child's Name	
Parent's/ Guardian's Name(s)	
Address	
Email	
Phone	

People in the household

Name	DOB

Tuition Information

Schedule	
Classroom	
Tuition	

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Income Information

If there are two adults in a household, regardless of marital status or tax filing status,
income from all sources for each adult must be included here

Parent/ Guardian: _____

Parent/ Guardian: _____

<p style="text-align: center;">Gross Monthly Income</p> <p>Add up all of the above to arrive at gross monthly income.</p>		
<p style="text-align: center;">Work Schedule</p>		
<p style="text-align: center;">Employment Income</p> <p>Please provide most recent paystub for any job for which you receive income. If you have a new job and have not been paid yet, a copy of your offer letter. If you are self-employed, provide your average monthly income.</p>		
<p style="text-align: center;">Financial Assistance</p>		
<p style="text-align: center;">Other income</p> <p>If you receive alimony or child support, rental income, interest/dividends, inheritance, or extended family support, or any other income in any form, list them here.</p>		

<p>Last Year's Adjusted Gross Income: Please provide a copy of your most recent tax return. If there are two adults in your household and you filed singly, please provide tax returns for both adults.</p>	
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I have applied for the following:

- DHS Child Care Assistance
- Childcare Network Scholarship

Does your family receive any State or Federal Assistance?

- Medicaid
- Food Stamps
- WIC services

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Expenses (Monthly Average per Household)

Rent/Mortgage		Food	
Utilities (Gas, Electric, water)		Medical Insurance	
Cable/Internet		Dental Insurance	
Car Payments		Credit Card Payment	
Gas for Car(s)		Bus Fare	
Adult Education		Child Education/Day Care	
Adult Extracurriculars		Child Extracurriculars	
Consumer Debt		Student Loan Debt	

If your family owes credit card debt, what is the balance due? _____

If your family owes student loan debt, what is the balance due? _____

On what type of repayment plan are you (and any other adult household member) enrolled?

- Standard
- Graduated
- Income Contingent
- Deferred
- Forbearance

Have you defaulted on any student loans?

- Yes
- No

Have you ever filed for bankruptcy?

- Yes
- No

If you own your home, describe how you were able to make the purchase and how you paid for the down payment:

What do you think is your approximate credit score? _____

Volunteer Contributions

I can contribute the following hours or tasks of volunteer work:	
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Narrative Please attach an additional document if you would like more room.

Please share more information about why you want your child to attend Green Apple Garden/ Manzanitas over other preschools/ daycare centers:

Provide any additional information about your financial circumstances that may aid the Board of Directors in making a decision regarding financial assistance:

By signing below the undersigned agrees and understands that all information contained in this Application and Personal Financial Statement shall remain confidential to Apple Playschools. However, as the purpose of this information is to obtain financial aid from Apple Playschools, the information will be subject to review by the Executive Director, Senior Financial Clerk, Board of Directors, legal counsel and/or Apple Playschools' accountants for the purpose of determining eligibility of the Applicant.

The applicant(s) certifies that all information in this application is true and complete to the best of their knowledge. The applicant(s) also certifies that should their gross income increase, they will notify the Senior Financial Clerk within 30 days. Any false statements, omissions, or failure to timely update financial information contained in this application is grounds for denial or revocation of the scholarship awarded. For staff, false statements or omissions herein may lead to discipline up to and including termination.

Applicant Signature

Date

Applicant Signature

Date

Approval

(To be completed by B.O.D)

Scholarship % granted	
Start Date- End Date	