

# **Creative Scholarship**

Creative School Age Child Care strives to make its programs accessible to all families. In that regard, the scholarship fund was instituted to make child care affordable for families for all income levels. If you are found eligible and there is a scholarship available, you will receive afterschool childcare tuition at a discounted rate. Parents must be working a minimum of 20 hours per week to be eligible. We would like to thank you in advance for providing the required documentation so that we can process your application. Through this documentation we can best provide for those that are in need of assistance. Scholarships are granted on a first come, first serve basis. Limited number of scholarships are available.

To be considered for a scholarship, please submit the following:

- \_\_\_\_\_ A completed and signed Creative Scholarship Application
- \_\_\_\_\_ A copy of your **most recent tax return** (form 1040) or a written statement indicating why no taxes were filed
- \_\_\_\_\_ All sources of income for the last 30 days including but not limited to: Payroll stubs, Social security benefit letter, disability benefit letter, retirement pay, reemployment benefit letter, pensions, alimony, child support, etc. for every wage earner within the household.

Incomplete applications will not be considered. Submitted documentation will not be returned so please provide copies.

Once your application has been processed, you will receive a letter granting or denying you the Creative Scholarship. If you have been granted the scholarship, the discounted tuition rate will be stated in the letter. You will be responsible for paying the regular tuition rate until this scholarship is processed. If granted the scholarship, discounted tuition will start on the date the scholarship was processed.

The Creative Scholarship is valid for one school semester. Each school semester, your financial situation will need to be re-evaluated and therefore, you will need to reapply for the Creative Scholarship. If denied and your financial situation changes, you may reapply for the Creative Scholarship.



# **Creative Scholarship Application**

Child's Name	ame Elementary School						
Do you have more than one child	in our program? If so, how many?						
Other Children's Names							
Have you ever been granted the	Creative Scholarship before? Yes No	If yes, when?					
Do you receive assistance from t	the USDA's Supplemental Nutrition Assistance Progra	am (SNAP)? Yes	s No				
PERSONAL/EMPLOYMENT INFORMAT	TION						
Parent/Guardian 1 Name	Phone						
Email	Relationship to Child						
Employer	Work Phone						
Address	City	State Zi	р				
Position	How long? Supervisor's Name						
Work Schedule							
Parent/Guardian 2 Name	Phone						
Email	Relationship to Child						
Employer	Work Phone						
Address	City	State Zi	р				
Position	How long? Supervisor's Name _						
Work Schedule							
FOR OFFICE USE ONLY							
Date Processed	Scholarship Amount Granted						
Granted/Denied By							
If Denied, Reason							

#### HOUSEHOLD INFORMATION

Number of persons in the child's household: Adults \_\_\_\_\_ Children \_\_\_\_\_ Children's Ages \_\_\_\_\_

How many wage earners live in the house? \_\_\_\_\_

Please list all wage earners in the household below.

	First Name	Last Name	Relationship to Child	Age	Claimed on Taxes as a Dependent?
1.					
2.					
3.					
4.					
5.					

## MONTHLY INCOME WORKSHEET

	AMOUNT					
INCOME	WAGE EARNER 1	WAGE EARNER 2	WAGE EARNER 3	WAGE EARNER 4	WAGE EARNER 5	
Wages from job (before taxes)	\$	\$	\$	\$	\$	
Social Security Income	\$	\$	\$	\$	\$	
Reemployment Benefits	\$	\$	\$	\$	\$	
Retirement/Pension	\$	\$	\$	\$	\$	
Disability Pay	\$	\$	\$	\$	\$	
Alimony	\$	\$	\$	\$	\$	
Child Support	\$	\$	\$	\$	\$	
Temporary Assistance of Needy Families (TANF)	\$	\$	\$	\$	\$	
Other (explain):	\$	\$	\$	\$	\$	
Other (explain):	\$	\$	\$	\$	\$	

### WRITTEN STATEMENT

In your own words, please describe why you need tuition assistance. Are there any special circumstances that contribute to the family's financial situation? If more space is needed, please attach additional page(s).

By completing and signing this application, I certify that the information on this application is true and accurate to the best of my knowledge. I am also aware that it is my responsibility to contact CSACC if and when any information stated within this application changes, as it might affect eligibility for the Creative Scholarship.

Parent or Guardian's Signature Date