

Children's Scholarship Fund (CSF) Elizabeth Program Guidelines

The 2009 Elizabeth scholarship is available to all children entering Kinder and public school students in grades 1-8 transferring into Catholic elementary schools in Elizabeth and the surrounding area. Students/Parents living outside of the Elizabeth area may also apply.

Who Can Be Considered for a Scholarship?

1. **All students entering Kinder** and public school students in grades **1-8** transferring into a Catholic elementary school living in **Elizabeth and the surrounding area**.
2. Families with a total family income that falls within the guidelines set by the **Free & Reduced Lunch Program**. (See Income Eligibility Scale)
3. Students must be coming from public school and entering grades **K- 8** in September 2009.
4. For any child entering grades **1- 8**, and currently in a public school, the family will need to provide a current public school report card to verify the child's public school attendance.

How Much Will the Scholarship Be?

1. The scholarship amount will be determined by the family's income and the school's tuition cost.
2. The scholarships will not cover the full tuition. Families will be expected to contribute a minimum of \$500 towards their child's education or the difference between the school tuition and the scholarship, as well as any additional school fees.
3. Provided there is sufficient funding, scholarships may be renewable every year, through 8th grade, assuming financial need continues and the family is current on the balance of tuition payments and meets other renewal guidelines.

How Can Families Apply for a Scholarship?

STEP 1: Find a school you wish your child or children to attend.

STEP 2: Once you have completed your Application and Financial Information Forms, gathered the required supporting documentation, including **signed 2008 Federal 1040 and W-2 Forms**. You may bring the forms to your target school and complete the school's admissions process (application form, testing to ensure proper grade placement, etc.)

STEP 3: If the school has space for your child and your child is admitted to the school, then the school should complete and sign the School Commitment Form that confirms your child's place at the school and the school's tuition cost if you receive a scholarship. All your forms and financial paperwork must be returned to **The Scholarship Fund for Inner-City Children** in order for your scholarship application to be complete. When your application is completed and approved, you will receive a letter from **The Scholarship Fund for Inner-City Children** letting you know the amount of your scholarship.

**** YOU WILL ONLY BE ELIGIBLE TO RECEIVE A SCHOLARSHIP WHEN ALL THREE STEPS ARE COMPLETED. ****

Send Completed Forms To:

Children's Scholarship Fund
c/o Scholarship Fund for Inner-City Children
171 Clifton Avenue
Newark, NJ 07104
Ph: (973) 497-4283

Children's Scholarship Fund Elizabeth Program Application Form First Come, First Serve

SECTION 1

Mother/Guardian Name _____
First Name Middle Initial or Name Last Name

Address _____ City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Whose? _____ Other Phone (____) _____

Ethnicity (optional): African-American Asian-American Latino/Hispanic American Native American Other _____

Father/Guardian Name _____
First Name Middle Initial or Name Last Name

Address _____ City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Whose? _____ Other Phone (____) _____

Ethnicity (optional): African-American Asian-American Latino/Hispanic American Native American Other _____

Please provide the following information ONLY for the children for whom you are applying:

SECTION 2

	Child 1	Child 2	Child 3	Child 4
Child's Full Name				
Child's Date of Birth				
Boy or Girl?				
Relationship to Child				
School Attended in (2008-2009)				
School Attending September 2009				
Child's Grade in September 2009				

I certify that all the information provided on this form is true and complete to the best of my knowledge. I promise to pay child's school account in a timely manner, ensure at least 90% attendance of my child(ren), and comply with the standards of my child(ren)'s chosen school. I understand that failure to comply with the above statements will result in the loss of my family's scholarship. I agree to allow the school to release grades and standardized test scores for use by CSF, in order to allow CSF to evaluate this program. I agree to allow my child's picture to be taken and used for promotional and fundraising purposes. Finally, I agree to release CSF from any and all liability in its efforts to provide this scholarship.

Signature of Parent or Guardian

Date

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Children's Scholarship Fund Elizabeth Program Financial Information Form

Mother/Guardian's Name: _____
First Name Middle Initial Last Name

Father/Guardian's Name: _____
First Name Middle Initial Last Name

Number of people in household: ADULTS _____ CHILDREN _____

Please fill out the following chart. Use YEARLY totals for each category.

<u>2008</u> INCOME SOURCES	MOTHER/GUARDIAN	FATHER/GUARDIAN
Adjusted Gross Income reported on 2008 FEDERAL 1040 Taxes (<i>attach SIGNED 1040 & W-2 copies</i>)	\$	\$
Child Support Income (<i>provide official documents</i>)	\$	\$
Public Assistance Cash (<i>provide official documents</i>)	\$	\$
Food Stamp Income (<i>provide official documents</i>)	\$	\$
Social Security Income (<i>provide official documents</i>)	\$	\$
Unemployment Benefits (<i>provide official documents</i>)	\$	\$
Public Housing Assistance/Section 8 (<i>provide official documents</i>)	\$	\$
TOTAL HOUSEHOLD INCOME	\$	\$

If you filed taxes for 2008:

Attach a copy of your signed 2008 Federal 1040 tax return and all W-2 forms. Couples filing separately must attach both forms. For a free copy of your 1040, call the Internal Revenue Service at 1-800-829-1040.

You must also attach complete and accurate documentation of any income NOT reported on your 1040 and official documentation for any household members whose names do not appear on your 1040.

If you did NOT file taxes for 2008:

You must also provide official documentation of **all 2008 income**, such as W2 forms, public assistance statements, child support documents, or Social Security statements, and official birth certificates for all children. Then, you must have this form notarized below:

I certify that this applicant has provided me or this notary service with adequate proof of income and that to my knowledge the financial information provided on this form is true and complete.

Space for notary stamp

 Notary Signature

 Notary Name Printed

 Date

I certify that all the information provided on this application is true and completed to the best of my knowledge. I have attached complete and accurate proof that the statements made in this application are true and I acknowledge that failure to do so will disqualify my children for scholarships.

 Print Name of Parent or Guardian

 Signature of Parent or Guardian

 Date



Children's Scholarship Fund

giving parents a choice • giving children a chance

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Elizabeth Program School Commitment Form

PLEASE ATTACH A TUITION SCHEDULE FOR 2009-2009 SCHOOL YEAR TO THIS FORM. THANK YOU.

To be completed by the Principal or Administrator

This is NOT an application form. It is to determine scholarship status prior to re-qualifying students and MUST be completed and returned. ONE STUDENT PER FORM. Please make additional copies as needed.

School Information:

Name of School: _____
Address: _____ City: _____ State: _____ Zip: _____
Administrator: _____ School Phone:(_____) _____ Fax:(_____) _____

Student Information:

Student Name: _____ Sex: _____
Parent/Guardian Name: _____ Relationship: _____
School attended last year: _____ Home Phone: (_____) _____

Tuition Information:

Grade in 2009-09 school year *(If your school does not use traditional grades, please use K for 5-year-olds, 1st for 6-year-olds, etc.):* _____
Start date (first day of enrollment) in 2009-2009 school year: _____
Tuition for this child *(include family discount if applicable, do not include registration, book or activity fees, uniform costs, etc.):* \$ _____
Amount of financial aid from your school or sources other than Children's Scholarship Fund: \$ _____

Please check the appropriate box for each statement below.

- This student has completed registration and has been accepted for enrollment. True False
- This student owes no money for tuition or fees at this school from years past. True False
- I promise to report to the scholarship program this student's attendance. Yes No
- I promise to report to the scholarship program if this student leaves to attend another school. Yes No

TERMS OF AGREEMENT

Our school has accepted this student for enrollment. Our school wishes to participate with the Children's Scholarship Fund in assisting in the education of the above student. We acknowledge that the Children's Scholarship Fund's continued payment is strictly contingent upon the family meeting and maintaining conditions of eligibility, and upon the family remaining current on all fees and tuition payments. We agree to monitor the situation and report to the Children's Scholarship Fund about any conditions that would disqualify the family from participation in the Children's Scholarship Fund program. Should any conditions occur that would change the amount of award given to the family, we will inform the program. We understand further that the Children's Scholarship Fund may, in consultation with a participating school, annually review the status and progress of participating students for the purposes of monitoring and verifying their continued eligibility for participation. Finally, we certify the above information to be correct and agree to the terms outlined.

Signature of Principal, Assistant Principal, or equivalent

Print Name of Principal, Assistant Principal, or equivalent

Title

Date

DO NOT WRITE HERE, CHILDREN'S SCHOLARSHIP FUND USE ONLY! Scholarship Amount: \$ _____