

Scholarship Application

Tuscarawas Central Catholic Elementary School and Immaculate Conception School participate in the Ohio Department of Education EdChoice Scholarship Program.

EdChoice Scholarships are available to qualifying families with students entering grades kindergarten through 12 in the 2020-21 school year.

This packet includes the application for the EdChoice Expansion Program.

The EdChoice Expansion Program is an income-based scholarship. For example, a family of four with a household income of \$52,400 or less is eligible for the EdChoice Expansion Scholarship. The application period for the Expansion Scholarship is now open! In many cases, qualifying families receive scholarships that pay the entire cost of tuition.

An application form for the Expansion Scholarship is included in this packet. It's two parts:

1. **The Scholarship Request Form** – complete and return this form to the school office along with a copy of a utility bill as proof of residency. The packet includes a description of acceptable forms of address proof. Please review it carefully! A copy of the child's birth certificate is also required. The application form, proof of residency, and birth certificate should be returned to the school office.
2. **The Income Verification Form** – To apply for the EdChoice Expansion Scholarship, complete this form and mail it to the Ohio Department of Education along with proof of income such as your 2019 W-2 form. This form should be mailed to the address listed on the form. If you like, we can mail it for you. The packet includes more information about the documents needed to verify your income.

We also offer scholarships through the diocese, school, and church. There are no income guidelines and all families are encouraged to apply. To apply for assistance from the diocese, school, and church you must complete a FACTS Grant and Aid Application. Log in to your FACTS account to complete the application. If you don't have a FACTS account, use the link on the school website to create an account. Your 2019 W2 form and 2018 or 2019 tax return are required.

IN ALL CASES, WE CAN HELP YOU COMPLETE THE APPLICATION FORMS. PLEASE CALL THE SCHOOL OFFICE FOR ASSISTANCE!

Aplicación de beca

Tuscarawas Central Catholic Elementary School y Immaculate Conception School participan en el Programa de Becas EdChoice del Departamento de Educación de Ohio.

Las Becas EdChoice están disponibles para familias que califican con estudiantes que ingresan a los grados de jardín de infantes a 12 en el año escolar 2020-21.

El programa tradicional EdChoice está disponible para las familias, independientemente de los ingresos cuyos estudiantes normalmente asistirían a una escuela designada por EdChoice. Las solicitudes para la beca tradicional EdChoice se aceptarán a partir del 1 de abril. Aún no se han determinado los criterios de elegibilidad y la lista de "Escuela designada por Edchoice" publicada anteriormente probablemente cambiará..

El Programa de Expansión EdChoice es una beca basada en ingresos. Por ejemplo, una familia de cuatro con un ingreso familiar de \$ 52,400 o menos es elegible para la Beca de Expansión EdChoice. ¡El período de solicitud para la Beca de Expansión ya está abierto!

En muchos casos, las familias que califican reciben becas que pagan el costo total de la matrícula.

En este paquete se incluye un formulario de solicitud para la beca de expansión. Tiene dos partes:

1. El Formulario de solicitud de beca: complete y devuelva este formulario a la oficina de la escuela junto con una copia de una factura de servicios públicos como prueba de residencia. El paquete incluye una descripción de formas aceptables de comprobante de domicilio. Por favor, revísalo con cuidado! También se requiere una copia del certificado de nacimiento del niño. El formulario de solicitud, el comprobante de residencia y el certificado de nacimiento deben devolverse a la oficina de la escuela.
2. El formulario de verificación de ingresos: para solicitar la beca EdChoice Expansion Scholarship, complete este formulario y envíelo por correo al Departamento de Educación de Ohio junto con un comprobante de ingresos, como su formulario W-2 de 2019. Este formulario debe enviarse por correo a la dirección que figura en el formulario. Si lo desea, podemos enviárselo por correo. El paquete incluye más información sobre los documentos necesarios para verificar sus ingresos.

También ofrecemos becas a través de la diócesis, la escuela y la iglesia. No hay pautas de ingresos y se recomienda a todas las familias que presenten su solicitud. Para solicitar asistencia de la diócesis, la escuela y la iglesia, debe completar una solicitud de subvención y ayuda de FACTS. Inicie sesión en su cuenta FACTS para completar la solicitud. Si no tiene una cuenta FACTS, use el enlace en el sitio web de la escuela para crear una cuenta. Se requiere su formulario W2 2019 y su declaración de impuestos 2018 o 2019.

En todos los casos, podemos ayudarlo a completar los formularios de solicitud. ¡LLAME A LA OFICINA DE LA ESCUELA PARA OBTENER ASISTENCIA!

EDCHOICE SCHOLARSHIP PROGRAM 2020-2021 REQUEST FORM

STUDENT INFORMATION	***Student Data Must Match Birth Certificate***		
	NAME:	_____	_____
		(First)	(Middle)
			(Last)
	DATE OF BIRTH	_____	LAST FOUR DIGITS SS# _____
			GENDER: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
	MOTHER MAIDEN NAME	_____	NATIVE LANGUAGE _____ ETHNICITY: _____
	CITY OF BIRTH	_____	GRADE LEVEL FOR 2019-2020 _____ GRADE LEVEL FOR 2020-2021 _____
IS YOUR CHILD AN INCOMING KINDERGARTENER?	<input type="checkbox"/> YES <input type="checkbox"/> NO	HAS THIS CHILD EVER ATTENDED OHIO PUBLIC SCHOOL?	
IS YOUR CHILD AN INCOMING HIGH SCHOOLER?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, WHERE: District _____	
		Building _____ Year _____	

Guardian Signing Scholarship Checks

I AM CHECK ONE Natural Parent Residential Parent Legal Guardian of student applying for scholarship funds (court documents required)

Adoptive Parent Student is at least eighteen years of age

PARENT/GUARDIAN	NAME:	_____	_____	_____
		(First)	(Middle)	(Last)
	DATE OF BIRTH:	_____	LAST FOUR DIGITS SS#: _____	
	PHYSICAL ADDRESS:	_____		
	CITY	_____	STATE _____	ZIP _____ COUNTY _____
	PHONE	_____	EMAIL	_____
	RELATIONSHIP TO STUDENT	_____		

SECONDARY PARENT/GUARDIAN	NAME:	_____	_____	_____
		(First)	(Middle)	(Last)
	DATE OF BIRTH:	_____	LAST FOUR OF SS# _____	
	PHYSICAL ADDRESS:	_____		
	CITY	_____	STATE _____	ZIP _____ COUNTY _____
	PHONE	_____	EMAIL	_____
	RELATIONSHIP TO STUDENT	_____		

*****ATTENTION EXPANSION APPLICANTS: INCOME VERIFICATION MUST BE COMPLETED TO APPLY FOR THE EDCHOICE EXPANSION SCHOLARSHIP*****

INCOME	By checking below, you are indicating you will complete the income verification process. Please obtain the Income Verification Form from the school OR from the EdChoice website: www.edchoice.ohio.gov .	
	<input type="checkbox"/> Yes	I believe that I qualify for low income status. I will submit a completed Income Verification Form and supporting documents to the EdChoice Office listed on the form.
	<input type="checkbox"/> No	I am not interested in applying for low income status. I either: 1) do not qualify for low income status or 2) do not want my income verified by the program.

RETURN TO THE PRIVATE SCHOOL WITH BIRTH CERTIFICATE AND UTILITY BILL BEFORE THE DEADLINE OF April 15 2020

EDCHOICE SCHOLARSHIP PROGRAM 2020-2021 REQUEST FORM

Information below **MUST** be completed to determine eligibility. My student is **CURRENTLY** attending a (check **ONLY** one and enter the school name).

SCHOOL INFORMATION	<input type="checkbox"/> Public School
	<input type="checkbox"/> Charter/Community School
	<input type="checkbox"/> Private School
	<input type="checkbox"/> Home Schooled (Never Attended an Ohio School)
	<input type="checkbox"/> New to Ohio
	<input type="checkbox"/> Pre-School
	<input type="checkbox"/> Other
Name of public school district you live in (e.g. Elyria City, Mansfield City, etc.):	
Name of public school building your child would be assigned to for the 2020-2021 School Year:	

ADDRESS VERIFICATION	Proof of residency is required of all first-year and renewal applicants and must be submitted to the school with the application. Parents/Guardians must document residency by providing the school with a current (less than 3 months old) utility bill. The utility bill MUST SHOW MATCHING SERVICE AND MAILING ADDRESS in the name of the Parent/Guardian. Post office boxes and Cell Phone Bills have no Service Address and therefore are not accepted.
	<i>Acceptable Utilities</i> (Must show matching Mailing and Service Address): Electric, Gas, Water, Sewer, Cable/Internet. <i>Other Acceptable Documents</i> : Monthly mortgage statement and Lease/rental agreement (signed) and one (1) other official document with parent's name and address. Additional information can be found on the scholarship webpage.

2020-2021 EDCHOICE PARENT AGREEMENT

I _____ AGREE TO THE FOLLOWING:
(Parent Name)

- * The information provided in this application is true and correct.
- * I have supplied the chartered nonpublic school with a certified copy of the student's birth certificate, copies of all custody/guardianship documentation for the student, and proof of my address.
- * I have submitted only one EdChoice application for this student.
- * The scholarship amount shall only be applied to the tuition of the enrolling school and I may be required to pay other fees and costs as prescribed by the policies of the school.
- * I will sign all scholarship checks received by the private school for my student in a timely manner. I understand that if I fail to endorse the scholarship checks to the school, I will be responsible for paying the student's tuition.
- * If I transfer my scholarship to another participating chartered nonpublic school, I will notify the school of my intent to withdraw and I will return to the original school to sign any remaining checks.
- * I will apply for any and all financial aid or tuition discounts and adjustments made regularly available to the students attending the school in which the student is accepted for enrollment.
- * I will abide by the Ohio Department of Education (ODE) dispute resolution process outlined in Ohio Administrative Code Section 3301-11-14.
- * If I am not a low income parent or did not complete the income verification process, I will be responsible for paying any difference between the scholarship amount and the tuition of the chartered nonpublic school.
- * I must inform ODE and the chartered nonpublic school of any change in the student's residential address or custody status.
- * I will not be able to renew my child's scholarship if, our family has moved to another city school district and our new neighborhood public school is not a designated EdChoice school, my child fails to take each state achievement test required for his/her grade/level, my child has more than twenty unexcused absences during the school year, or I fail to complete the renewal process. If my child has received an EdChoice Expansion scholarship I must maintain Ohio residency and verify my income annually.
- * I have received and understand the policy handbook of the chartered nonpublic school and will abide by its provisions.
- * I understand that if my child's scholarship has been awarded in error, it will be terminated immediately and I would then be responsible for paying the tuition if I decide to keep my child at the private school.

I designate: _____ (Name of Private School) to submit an application on my behalf for the Scholarship Program through the Ohio Department of Education electronic application system.

BY SIGNING BELOW, I AGREE TO ALL THE ABOVE STATEMENTS

Signature of Legal Guardian Signing the Tuition Check: Date:

RETURN TO THE PRIVATE SCHOOL WITH BIRTH CERTIFICATE AND UTILITY BILL BEFORE THE DEADLINE OF April 15, 2020

Cleveland and EdChoice Scholarship Programs Acceptable Forms of Address Proof

Proof of residency is required of all first-year and renewal applicants and must be submitted to the school with the application. Parents/Guardians must document residency by providing the school with a current (less than 3 months old) utility bill. The utility bill **MUST SHOW MATCHING SERVICE AND MAILING ADDRESS** in the name of the Parent/Guardian. Post office boxes and Cell Phone Bills have no Service Address and therefore are not accepted.

Acceptable Utilities (Must show matching Mailing and Service Address): Electric, Gas, Water, Sewer, Cable/Internet.
Other Acceptable Documents: Monthly mortgage statement and Lease/rental agreement (signed) and one (1) other official document (like a pay stub, bank statement, insurance statement, car payment statement, etc) with parent's name and address. Additional information can be found on the scholarship webpage.

If the student's parent/guardian has no utilities in his/her name, then the parent/guardian must provide the following:

1. A signed and notarized statement from the person (i.e., third party) with whom the parent/guardian and the student live or from whom they rent that confirms that they reside at the address. This letter must be from the third party, not the parent/guardian.
2. A copy of a current utility bill in the name of that third party, AND
3. A copy of a piece of current business type mail in the name of the parent/guardian.
 - a. Business mail would be things such as pay stubs, car notes, car insurance, monthly bank statements, and official document from a government agency. It must be a business with which the parent/guardian is currently doing regular business.
 - b. NO credit card solicitations or service set-up work orders. NOTHING HAND WRITTEN.
4. Following is an example of how this alternative works: Ms. Smith's daughter has an EdChoice scholarship. She and her daughter reside with her uncle, Mr. Brown. Mr. Brown will need to write or type a statement and have it notarized, which should include him signing the statement in front of a notary. He will also need to provide a copy of a current utility bill in his name, since he owns or rents the property. Ms. Smith must provide a copy of last month's bank statement. Compiled together, this alternative will suffice as proof of residence for the student regarding the current school year. She must do this annually. If she should move and obtain utilities in her name, then this alternative method is no longer her option and she must comply with the required utility bill requirement instead.
5. Another example of how this alternative works is the following: Mr. Johnson's son has an EdChoice scholarship. Mr. Johnson and his son live in an apartment. All of the utilities are included in the price of the rent, so Mr. Johnson does not receive any utility bills in his name. Mr. Johnson will need to obtain a notarized letter from the rental office confirming that he and his son live in the apartment. Mr. Johnson will also need to provide another form of address proof, such as a current pay stub or bank statement.

Unacceptable proof of address includes cell phone bills, tax forms, junk mail, and driver's licenses. Old and outdated (more than 3 months) address proof is also unacceptable.

Parents/guardians must remember to keep the school informed of any address changes that occur and to submit the required documentation to ensure continued program eligibility.

The Ohio Department of Education does not discriminate on the basis of race, religion, gender, nationality, age, disability, or ethnic background.

SCHOLARSHIP PROGRAM 2020-2021 INCOME VERIFICATION FORM

Income Verification is one step in the scholarship application process. Your child must also be enrolled at a participating school. The Income Verification Process is important for some families to determine if they meet low income requirements of the scholarship program. If you are a new applicant of the Scholarship and you qualify for low income status, you will not have to pay tuition above the amount of the scholarship. If you are a new or renewal applicant of the EdChoice Scholarship, you must complete the income process every year to receive a scholarship award.

Helpful tools can be found on the scholarship website at: <http://edchoice.education.ohio.gov> or <http://cstp.education.ohio.gov> If you have more than one child applying for a scholarship, only one income verification form is needed. The scholarship office is not able to return original documents to you; please send only copies. This form and copies of income documents must be mailed to the address below **ON BACK OF THIS FORM** by the priority application period deadline, April 15, 2020:

#1

PRIMARY PARENT

NAME: _____
FIRST MIDDLE LAST MARITAL STATUS

DATE OF BIRTH: _____ GENDER: F M LAST FOUR DIGIT SS#: _____

ADDRESS: _____

CITY: _____ OHIO ZIP CODE: _____ RECEIVES INCOME: Y N

PHONE: _____ E-MAIL: _____

Name of Private school where your child is enrolled _____

LIST ALL MEMBERS OF YOUR HOUSEHOLD – Including scholarship students, make a copy of this page if more space is needed.

#2

NAME: _____
FIRST MIDDLE LAST

DATE OF BIRTH: _____ GENDER: F M LAST FOUR DIGIT SS#: _____

RELATIONSHIP TO YOU: _____

SCHOLARSHIP STATUS (CHECK ONE): NEW: RENEWAL: NA: RECEIVES INCOME: Y N

#3

NAME: _____
FIRST MIDDLE LAST

DATE OF BIRTH: _____ GENDER: F M LAST FOUR DIGIT SS#: _____

RELATIONSHIP TO YOU: _____

SCHOLARSHIP STATUS (CHECK ONE): NEW: RENEWAL: NA: RECEIVES INCOME: Y N

#4

NAME: _____
FIRST MIDDLE LAST

DATE OF BIRTH: _____ GENDER: F M LAST FOUR DIGIT SS#: _____

RELATIONSHIP TO YOU: _____

SCHOLARSHIP STATUS (CHECK ONE): NEW: RENEWAL: NA: RECEIVES INCOME: Y N

#5

NAME: _____
FIRST MIDDLE LAST

DATE OF BIRTH: _____ GENDER: F M LAST FOUR DIGIT SS#: _____

RELATIONSHIP TO YOU: _____

SCHOLARSHIP STATUS (CHECK ONE): NEW: RENEWAL: NA: RECEIVES INCOME: Y N

**EdChoice & Cleveland Scholarship Program
2020-2021 Income Verification Form**

2020 FEDERAL POVERTY GUIDELINES
Source: Office of the Asst. Sec. for Planning & Eval/US Dept. of HHS.

EdChoice families qualify for low income status if income is at or below 200% of the Federal Poverty Guidelines. This chart will help you determine if you may qualify.

Income status determines priority for awarding scholarships. It also determines if your family will be responsible for paying any tuition that is not covered by the scholarship.

Based on the number of people in your household, if your gross annual income is the amount listed on the chart or less, you may qualify for low income status.

Household size is determined by the following: the scholarship student, the birth mother or the legal guardian of the scholarship student, the spouse (also includes birth father of any child in the household), all children under the age of 18 which the legal guardian or spouse also has legal custody.

Number in Household	Gross Annual Amount (200%)
1	\$25,520
2	\$34,480
3	\$43,440
4	\$52,400
5	\$61,360
6	\$70,320
7	\$79,280
8	\$88,240
For each additional person add:	\$8,960

You must provide documentation for all sources of income in your home. The documents must represent their current income. Do not send original documents, as they cannot be returned and block the first 5 digits of all Social security numbers in all documents, only the last 4 digits are allowed to be seen. See page 3 for acceptable income documents.

List each person that has earned or unearned income. If someone has more than one source of income, use multiple lines.

INCOME INFORMATION	First and Last Name	Name of Employer or Income Source	Gross Amount Before Taxes	How Often Received
	Example: John Smith	Employment - Kroger	\$1200	Bi-Weekly
	Example: Jane Smith	Child Support	\$475	Monthly

X

SIGNATURE OF PRIMARY LEGAL GUARDIAN REQUIRED

DATE

**Cleveland and EdChoice Scholarship Programs
How to Complete the Income Verification Process**

1. Obtain the Income Verification Form on our website at: <http://education.ohio.gov/edchoice> or <http://education.ohio.gov/clevelandscholarship> or the nonpublic school where you have applied for or renewed a scholarship. (Page 1 and 2 of this document).
2. Complete the parent/guardian information on page 1, filling in all lines. This should be the same information you have provided on the scholarship application/renewal form.
3. List household members (i.e. spouse, children) on page 1 and provide all of the information requested.
4. Write your sources of income on page 2 and provide copies of acceptable, supporting documentation.
5. Sign at the bottom of page 2. Do not return page 3.
6. Based on your household, determine from the list below which one fits your status. For example: If your status is (a) of the choices below, you only have to submit the documents for that option, not all of them.
 - a) If you are currently employed (and have the same job you had all of last year) send either 4 current pay stubs for each job, your W-2's, your 2019 Federal tax forms or your 2019 Federal tax transcripts (can obtain either online at WWW.IRS.GOV or by mailing the 4506-T form to the IRS).
 - b) If you are currently employed (but did not work your current job for all of last year) send 4 current pay stubs for each job.
 - c) If you are self-employed: Send a copy of your 2019 Federal income tax forms, including all Schedules or 2019 Federal tax transcript.
 - d) If you receive other income sources: (eg., food stamps/OWF, child support, unemployment, Social Security, etc.): Send copies of official documentation that shows how much you receive from each one. Example: If you currently work and receive food stamps and child support, you need to send in four current pay stubs, official documentation that shows how much you receive in food stamps, and official documentation that shows how much you receive in child support.
 - e) If you have no income or you do not have pay stubs or W-2's: Provide your 2019 federal tax transcript from the IRS. (WWW.IRS.GOV). Please mail the request form to the IRS and once you receive your transcript please mail that form to our office with the Income Verification form.

DO NOT send original documents. Make copies (ex. W-2, check stubs, etc.) to send to our office and block the first 5 digits of all Social Security numbers on all documents only leaving the last 4 digits to be seen. Submit only one (1) form per family. (Ex. A family with 3 students in the program only needs to send the form one time per school year). Keep a copy for your records.

Mail the Income Verification form and supporting income documentation to the Ohio Department of Education, Scholarship Program Office 25 S. Front Street, Mail Stop 309, Columbus, Ohio 43215 by the April 15, 2020 priority deadline.

The parent is responsible for mailing in the Income Verification documents. The private school is not responsible.

Contact Scholarship Program at 614-728-2743, or by email at Edchoice@education.ohio.gov or Cleveland.scholarship@education.ohio.gov, if you have any questions.