



Scholarship Application

Student Information

Name _____
Last First Middle

Street Address _____

City, State, Zip _____

Date of Birth _____ Social Security Number _____ Grade in Fall 2018 (must be K-12) _____

Name of private school for which you are requesting Tuition Assistance _____

School's Street Address _____

City, State Zip _____

Name of school student would attend if they attended public school _____

Parent or Guardian Information (only include parents/guardians living in the same home as the child)

Name #1 _____
Last First Middle

Name #2 _____
Last First Middle

Telephone # _____

Email _____

Source(s) of income _____

Last 4 digits of Social Security Number _____ Parent #1 _____ Parent #2 _____

Income/ Household Information

Total Pennsylvania Taxable Income (PA-40 line 9) \$ _____

Total Number in Household _____ Total # of Dependents in Household _____

STUDENT'S NAME: _____

Other Dependent(s) Information – List other dependent(s) living in house (as claimed on federal tax return)

	Last Name	First Name	Date of Birth
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____

Authorization

By signing this application, I certify that:

- I understand that only one scholarship will be awarded per family
- I have fully read the guidelines on page 4 and meet the requirements
- I understand that completion of this application does not imply that scholarship funding will be provided. In accordance with state requirements, **priority will be given in the following order: applicants who received a scholarship during previous year; household income level based on federal poverty levels; date of application. If a tie exists, a lottery will occur.**
- I understand my **complete** application, **including all required attachments** (copy of 2017 PA tax return, 2017 federal tax return, all W2s, and page 3 completed by the school) must be received by April 20, 2018 to be considered.
- All information is true and accurate
- I authorize GECAC to verify information in order to determine eligibility for this program.
- I understand that tuition payment will be made directly to the named school. Should the student withdraw/leave the named school, the school's refund policy shall apply and any unused funds will be returned to GECAC.

Signature of Parent or Guardian

Date

STUDENT'S NAME: _____

School Data

School Data must be completed by authorized school personnel for the school child will be attending as listed on page one.

Cost of tuition per child listed on page 1 \$ _____

Other tuition assistance, credit or scholarships to be applied \$ _____

Total tuition due by household for the 2018-2019 school year \$ _____

I understand that tuition payment will be made directly to the named school. Should the student withdraw/leave the named school, the school's refund policy shall apply and any unused funds will be returned to GECAC. I verify that the student information reported on page 1 is correct in accordance with school records and that tuition information reported on this page is correct.

Authorized signature on behalf of the School

Date

Printed Name

Phone Number

Title

STUDENT'S NAME: _____

Greater Erie Community Action Committee

Scholarship Program

Eligibility Requirements

1. Family must be a resident of Erie County, PA
2. Student must be attending a public or private elementary or secondary school in Erie County, PA for which paying tuition is a requirement of attendance.
3. The age of the student ranges from earliest admission age for a school's kindergarten program through the age attained upon graduation from secondary school or 21 years of age, whichever occurs first.
4. Income Guidelines: Annual household income of \$77,648 with an additional \$15,530 allowed for the student and each additional dependent (as defined by the IRS) living in the household.
5. A household includes an individual living alone or an individual living with the following:
 - A spouse, parent and their unemancipated minor children
 - Other unemancipated minor children who are related by blood or marriage; or
 - Other adults or unemancipated minor children living in the household who are dependent upon the individual.
6. Household income includes all moneys and property received of whatever nature and from whatever source, but excludes: periodic payments for sickness and disability, worker's compensation, public assistance, unemployment compensation, retirement benefits, compensation by United States servicemen serving in a combat zone.
7. The amount of a scholarship paid on behalf of a student may not exceed the actual amount of tuition charges by the school nor exceed the actual amount of tuition charged by the school to non-scholarship students.
8. Only one scholarship will be awarded per family.
9. **A copy of your 2017 Pennsylvania Income Tax Return, your 2017 Federal Income Tax Return and a copy of W-2's must accompany this application.** If there have been exceptional changes in your income since the filing year, please provide documentation, i.e. Verification of unemployment compensation, worker's compensation, disability earnings, reduced earnings, etc. If you did not file federal income taxes, documentation of other types of financial support must accompany this application, i.e. public assistance.
10. Priority will be given in the following order: applicants who received a scholarship during previous year; household income level based on federal poverty levels; date of application. If a tie exists, a lottery will occur.
11. Applications must be received no later than April 20th. Incomplete applications will be discarded.

**This Scholarship Program is funded by contributions to the
Pennsylvania Department of Community and Economic Development
Educational Improvement Tax Credit Program and/or the Opportunity Scholarship Tax Credit Program.**