

## Scholarship Program Details

- Hands Up! Preschool's monthly tuition is \$1,036, \$844 or \$680. Scholarships are income-based, and are given according to the following levels on a first-come, first-serve basis:
  - **70%** of tuition covered by scholarship
  - **50%** of tuition covered by scholarship
  - **30%** of tuition covered by scholarship
  
- Parents must pay the registration fee of \$25 and complete the registration packet to reserve their child's enrollment spot.
  
- All scholarship recipients will be asked to sign and complete the Parent Contract and fulfill the required parent hours and parent classes.
  
- If any information is falsified on the application or supporting documentation, the scholarship will immediately be revoked.
  
- Scholarship funds are designated to support preschool tuition for regular school hours and do not include additional fees or charges.
  
- Scholarships are awarded for one school year August-May. Applicants must reapply each year for their Scholarship to be reviewed by the Scholarship Review Committee.

### Eligibility Requirements:

- The child must be age eligible for the Hands Up! Preschool Program.
  
- All families eligible for state funding through Families First or Smart Steps must first apply for these programs. Families must provide proof of denial to these programs or prove that they are ineligible based on income or other eligibility requirements.
  
- A family must provide income information and supporting documentation (i.e. check stubs, W-2). Documentation must be presented for all persons contributing to the household family income.

## Application Process

- Complete the Hands Up! Preschool Scholarship Application and submit to the Executive Director, in person, email or mail to 185 Greenfield Drive, Jackson TN 38305.
- Applicants must submit a copy of their most recent income tax form or two months of check stubs.
- Applicants must submit a Photo ID for each custodial parent.
- Scholarship applications will be reviewed by the Executive Director and the Hands Up! Scholarship Review Committee composed of members of the Board of Directors.
- All applicants will be notified of the Committee's decision as soon as possible.
- Applicants who are approved for scholarships will receive a Scholarship Agreement. The Agreement must be completed and returned within one business week. If the agreement is not received by that timeframe, the scholarship is considered null and void and the family will be responsible for making all tuition payments as outlined in the Tuition Agreement.
- All information received during the scholarship process will be kept confidential, with applications being presented to the Scholarship Review Committee blindly.
- Our financial assistance fund is limited. We cannot guarantee that all applicants will receive assistance.
- If you do receive scholarship funds from Hands Up! Preschool, it is expected that your child's attendance be at least 90% to remain eligible for the tuition assistance. If attendance does not meet 90% and the child's absences are unexcused, then the preschool will meet with the parent to try and address the problem. Ongoing attendance problems may result in the loss of scholarship assistance.

# Scholarship Application

## Background Information:

Date: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address (including city and zip): \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Income: \_\_\_\_\_ Weekly Biweekly Monthly

Average hours worked per week: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address (including city and zip): \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Income: \_\_\_\_\_ Weekly Biweekly Monthly

Average hours worked per week: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

**Living Arrangements:**

Child lives with: Mother Father Both Other

Household Size: \_\_\_\_\_ Adults \_\_\_\_\_ Children

Total Gross Monthly Income: (Including all members contributing to the income of the household)

\$ \_\_\_\_\_

Do you or anyone in your household receive additional financial assistance from any of the following?

Unemployment: \$ \_\_\_\_\_ Alimony: \$ \_\_\_\_\_

Child Support: \$ \_\_\_\_\_ Social Security: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

**Family's Monthly Expenses:**

Rent/Mortgage: \_\_\_\_\_ Insurance: \_\_\_\_\_

Food: \_\_\_\_\_ Medical: \_\_\_\_\_

Utilities: \_\_\_\_\_ Clothing: \_\_\_\_\_

Car Payment: \_\_\_\_\_ Telephone: \_\_\_\_\_

Childcare: \_\_\_\_\_ Other Payments: \_\_\_\_\_

Total Monthly Expenses (from above): \_\_\_\_\_

Please explain any special financial circumstances affecting the family's budget that the committee should be aware of:

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Please explain how you feel your child will benefit from the Hands Up! Preschool Program:

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Is there anything else you would like for us to know about your family or your child as we consider Scholarships for the 2019-2020 school year?

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Is your enrollment at Hands Up! Preschool contingent upon the receipt of scholarship funds? Y N

Will you need (please circle): Aftercare Beforecare

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only**

Date Received: \_\_\_\_\_ Director Initials: \_\_\_\_\_

Date of Committee Review: \_\_\_\_\_ Committee Determination: \_\_\_\_\_