



# Hartley Nature Preschool

## Scholarship Application 2018-19

Child's Name \_\_\_\_\_

Child's Class for 2018-19 \_\_\_\_\_ Child's Date of Birth \_\_\_\_\_

Parent(s)/Guardian(s) Names \_\_\_\_\_

Home Address \_\_\_\_\_

Phone(s) \_\_\_\_\_ Email address(es) \_\_\_\_\_

Household size (including adults and all dependent children) \_\_\_\_\_

2017 Household Annual Income (as stated on 2017 1040 or other tax form) \_\_\_\_\_

2018 Estimated Household Income \_\_\_\_\_ Income measure:  Weekly  Bi-weekly

Documentation Enclosed

Monthly  Annually

**A copy of an official document showing your family's income or qualification for a county, state, or school needs-based assistance program (i.e. free and reduced lunch) is required.**

Please comment on any special circumstances that affect your need for tuition assistance and define the amount of scholarship assistance you need: \_\_\_\_\_

\_\_\_\_\_

Is there any other information you would like us to know? \_\_\_\_\_

\_\_\_\_\_

### Additional Funding Sources:

I have already submitted an application for the following scholarship programs for the 2017-18 preschool year:

- MN Early Learning Scholarship       St. Louis County Child Care Assistance Program

My application  **was**  **was not** accepted for one or more state or county scholarship program listed above.

OR  My family income does not qualify for any state or county funding.

*Scholarships are given based on need. Scholarships may cover 25-75% of monthly tuition with the remaining tuition covered by the family. The amount of assistance awarded is determined on a case by case basis.*

**I hereby certify that all of the above information is true and correct. In addition, I understand that Hartley Nature Center may verify the information on this application.**

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_

For office use only:

Date Received \_\_\_\_\_ Initials \_\_\_\_\_

Scholarship Granted: Yes No % Amount \_\_\_\_\_

Class Placement \_\_\_\_\_

