



## Confidential Application for Third Street Academy Pre-K Tuition Scholarships

### DESCRIPTION AND CRITERIA

This document is to be used by students and their parents to apply for the Third Street Academy Tuition Scholarship. The TSAT- Scholarship is for:

- a) Residents of Pitt County, NC with children ages four years and older,
- b) Officially registered/enrolled/attending Third Street Academy,
- c) Earn a household income of less than \$80,000 annually.

**The application form must be accompanied by a copy of the most recent, signed, IRS Federal Tax Return for all wage-earning adults residing in the household, or it will be considered incomplete. (We NO LONGER accept pay stubs, W-2 Forms or state tax return forms.)**

**Return the completed application and attachments to the TSA Admin Office.**

**APPLICATIONS MUST BE HAND DELIVERED. Faxed or E-mailed applications will NOT be accepted.**

### APPLICATION DEADLINES

**Applications MUST be RECEIVED no later than 5:30pm on:**

- |          |                             |   |
|----------|-----------------------------|---|
| Round 1: | <b>Received February 28</b> | for academic year 2018-2019               |
| Round 2: | <b>Received June 8</b>      | for applications received March 1-June 8  |
| Round 3: | <b>Received August 1</b>    | for applications received June 8-August 1 |

(If the deadline falls on a weekend or holiday, applications may be received the next business day.) All applications must be received by 5:30pm on the deadline date (or the next business day if the deadline falls on a weekend or holiday.) **Applications that are incomplete, do not meet the eligibility criteria, and/or are received past the deadline date will not be considered.**

All scholarship awards are paid directly to Third Street Academy on behalf of the student and should be credited by the school to the student's account on a pro-rated monthly basis. Scholarship awards may not exceed the actual amount of tuition charged by the program, including other scholarships or tuition assistance for the child.

### AGE AND INCOME ELIGIBILITY CRITERIA

An eligible student must be at least 4 years of age, officially registered/enrolled in and/or at-attending Third Street Academy, and is a member of a household with an annual household in-come of not more than \$79,999.00 with 2 or more dependents **(as defined by the IRS) living within the same household.**

**Income Eligibility Information: VERIFICATION IS REQUIRED FOR ALL ADULT WAGE EARNERS RESIDING IN THE HOUSEHOLD**



In calculating household income for determining student eligibility, **ALL monies and property received of whatever nature and from whatever source are to be included, except for the following:**

- a. Periodic payments for sickness and disability other than regular wages received during a period of sickness or disability.
- b. Disability, retirement or other payments arising under workers' compensation acts, occupational disease acts and similar legislation by any government.
- c. Payments commonly recognized as old age or retirement benefits paid to persons retired from service after reaching a specific age or after a stated period of employment.
- d. Payments commonly known as public assistance or unemployment compensation payments by a governmental agency.
- e. Payments to reimburse actual expenses.
- f. Payments made by employers or labor unions for programs covering hospitalization, sickness, disability or death, supplemental unemployment benefits, strike benefits, social security and retirement.
- g. Compensation received by United States servicemen/women serving in a combat zone.

#### INCOME ELIGIBILITY SCALE

Monthly Scholarship					Monthly Fees After Scholarship				
Income	Number of Dependents				Income	Number of Dependents			
	1	2	3	4+		1	2	3	4+
Under \$10,000	\$ 490	\$ 495	\$ 500	\$ 500	Under \$10,000	\$110	\$105	\$100	\$100
\$10,000 - \$14,999	\$ 480	\$ 485	\$ 490	\$ 490	\$10,000-\$14,999	\$120	\$115	\$110	\$110
\$15,000 - \$19,999	\$ 470	\$ 475	\$ 475	\$ 480	\$15,000-\$19,999	\$130	\$125	\$125	\$120
\$20,000 - \$24,999	\$ 460	\$ 465	\$ 465	\$ 470	\$20,000-\$24,999	\$140	\$135	\$135	\$130
\$25,000 - \$29,999	\$ 460	\$ 465	\$ 465	\$ 470	\$25,000-\$29,999	\$140	\$135	\$135	\$130
\$30,000 - \$34,999	\$ 450	\$ 455	\$ 455	\$ 460	\$30,000-\$34,999	\$150	\$145	\$145	\$140
\$35,000 - \$39,999	\$ 430	\$ 435	\$ 435	\$ 440	\$35,000-\$39,999	\$170	\$165	\$165	\$160
\$40,000 - \$44,999	\$ 370	\$ 390	\$ 400	\$ 420	\$40,000-\$44,999	\$230	\$210	\$200	\$180
\$45,000 - \$49,999	\$ 320	\$ 345	\$ 355	\$ 365	\$45,000-\$49,999	\$280	\$255	\$245	\$235
\$50,000 - \$59,999	\$ 195	\$ 220	\$ 240	\$ 260	\$50,000-\$59,999	\$405	\$380	\$360	\$340
\$60,000 - \$69,999	\$ 70	\$ 95	\$ 120	\$ 145	\$60,000-\$69,999	\$530	\$505	\$480	\$455
\$70,000 - \$79,999	\$ -	\$ -	\$ -	\$ -	\$70,000-79,000	\$600	\$600	\$600	\$600

**Full tuition for families is \$6,000 per year.**

To reserve a space for your child, a non-refundable deposit for the first month's tuition is due by August 1, 2018. If this deposit is not made on or before August 1st, your child's spot at the Academy may be given to an alternate.

Tuition is paid in 10 Monthly payments

Last payment due: May 5, 2019

Note: Tuition for siblings will be half the regular monthly payment for each additional child. For example: a family that has both children at the Academy will pay \$600/mo plus \$300/mo. If a family has 3 children at the Academy, the payments each month would be \$600, plus \$300, plus \$300. The minimum monthly amount for tuition is \$300 regardless of the number of siblings attending.



**1. Primary Parent(s)/ Legal Guardian(s) (who is/are residing with student and is the primary custodian)**

Name: \_\_\_\_\_

**Circle one:** Father                  Mother                  Stepfather                  Stepmother                  Other (specify) \_\_\_\_\_

Name: \_\_\_\_\_

**Circle one:** Father                  Mother                  Stepfather                  Stepmother                  Other (specify) \_\_\_\_\_

**2. Primary Parent/Legal Guardian Contact Information:**

Street Address: \_\_\_\_\_ City/St/Zip \_\_\_\_\_

Mailing Address (if different from street address): \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_

County: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Child(ren) Attending Third Street Academy for whom scholarship is requested (Print Neatly):**

Child 1 Full Name (First, MI, Last): \_\_\_\_\_

Age \_\_\_\_\_ Birth date \_\_\_\_\_ Grade Enrolled (for scholarship year) \_\_\_\_\_

Other scholarships or tuition assistance: \_\_\_\_\_

Child 2 Full Name (First, MI, Last): \_\_\_\_\_

Age \_\_\_\_\_ Birth date \_\_\_\_\_ Grade Enrolled (for scholarship year) \_\_\_\_\_

Other scholarships or tuition assistance: \_\_\_\_\_

**4. Names and relationship of EVERYONE living in the house/household as the applicant. Include yourself and all individuals listed above and other persons whether or not they are related by blood or marriage. MUST provide current custody order for children involved in partial custody/visitation.**

Name	Relationship to parent/guardian	Age	M/F	Dependent
_____	_____	_____	_____	Yes No
_____	_____	_____	_____	Yes No
_____	_____	_____	_____	Yes No
_____	_____	_____	_____	Yes No
_____	_____	_____	_____	Yes No

(Please continue on separate sheet for other household members.)

**5. Attach a complete photocopy of the most recent Federal IRS Tax Return - Form 1040, 1040A, or 1040EZ (as signed and filed with the IRS, including all Schedules) Forms for ALL wage-earning adults residing with the applicant(s). If you do not file an IRS Form 1040 and receive only non-taxable income please submit documentation/verification of your non-taxable income. (This is required for acceptance of this application.)**



**6. Signature of Parent(s) or Legal Guardian(s).** I certify that all information on this form, as well as all supporting documentation, is true, correct, and complete to the best of my/our knowledge and that all household income has been reported. I understand that deliberate misrepresentation of this information may result in the scholarship being denied or revoked, and any payments made by TSA must be reimbursed.

\_\_\_\_\_  
Signature of Parent and/or Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

- 1) The amount of scholarship paid for any individual student shall not exceed the actual tuition and fees charged. Max scholarship is \$25 less than full tuition. Students must be registered, enrolled, and/or attending the school at the time application is submitted.
- 2) The scholarship will be paid directly to the school on behalf of the student. The family shall not receive any direct cash benefit from the scholarship.
- 3) Acceptance of this scholarship does not exempt the family or student from abiding by the policies of the school and the school has the right to remove a child from the program at any time for failure to abide by their policies.
- 4) Selection for scholarship shall be determined without regard to race, gender, religion, or similar characteristics of the applicants. Scholarship amounts are based on a sliding income scale as determined by the TSA Grantmaking Committee, as well as upon the availability of funds and the number of eligible applicants.
- 5) All application information must be fully completed and submitted on time by the applicant in order for the application to be considered, including the Application Form, a copy of the most recent Federal Income Tax Return, and a copy of the student's school transcript and submitted according to the application deadline policy.
- 6) TSA is not responsible for lost, missing, misdirected, or late applications or supplemental information.
- 7) All application information will be maintained by TSA in the strictest confidentiality, including income information.

**By signing this form, we agree to abide by the TSA Scholarship Policies and Procedures. Further, we acknowledge that failure to abide by these policies and procedures may result in the student's removal from the TSA scholarship program. (THIS FORM MUST BE RETURNED WITH THE APPLICATION)**

\_\_\_\_\_  
Signature of Parent and/or Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Please Print Child(rens) Name(s)

**PLEASE KEEP A COPY OF THIS POLICY FOR YOUR REFERENCE**