



Kindergarten Prep Scholarship Application

Up to \$400/month awarded for
August 1, 2021 – July 31, 2022

Child's Schedule: _____ 5 Full Days _____ 5 Half Days AM _____ 2.5 hr. Days (9-11:30AM)

Child's Name: _____ Child's Last 4 SSN#: _____
(First – Middle – Last Name required)
 ___ Female ___ Male IEP: ___ No ___ Yes-Disability _____

Child's Birth – Date: _____ City: _____ State: _____
Child MUST be 4 years old by September 30, 2021 to be eligible.

Eligibility: Child on an IEP or Financial Need

A child who is 4 years old by September 30, 2021 is eligible if the child is on an IEP or the total Annual Family Income is below 200% of the 2021 Federal Poverty Guidelines.

Household Size	200%
2	\$34,840
3	\$43,920
4	\$53,000
5	\$62,080
6	\$71,160
7	\$80,240
8	\$89,320

___ My family is over income

Race/Ethnicity: ___ Black, Non-Hispanic ___ White, Non-Hispanic ___ Hispanic ___ Multiracial
 ___ American Indian or Alaskan Native ___ Native Hawaiian or other Pacific Islander ___ Asian or Pacific Islander

Native Language: ___ English ___ Spanish ___ Other: _____ Limited English: ___ No ___ Yes

Parent/Guardian Name: _____ Phone: _____

Mother's Maiden Name: _____ Parent's Last 4 SSN#: _____

School District of Residence: ___ Dayton City Schools ___ Fairborn City Schools
 ___ Other: _____
(Priority will be given to children in Dayton or Fairborn.)

County of Residence: ___ Montgomery ___ Greene Other: _____
 Child's Date of Residence in this County: _____ (could be child's birth date)

Family Financial Information (required unless over income) Number of Family Members _____

Total Annual Income \$ _____

Gross Income reported on Paystub #1: ___ weekly ___ bi-weekly \$ _____

Gross income reported on Paystub #2: ___ weekly ___ bi-weekly \$ _____
(Copy of 2 consecutive paystubs required.)

Kindergarten Prep Scholarships are part time preschool scholarships, funded through the Ohio Department of Education Early Childhood Education Grant, awarded to Mini University.

Authorization and Release of Information

I authorize Mini University, Inc. to receive financial information and to obtain verification of this information and employment verification from other sources for the sole purpose of determining my family's eligibility for a Kindergarten Prep Scholarship. This authorization shall remain in effect for one year from the date of my signature unless otherwise stated. I also understand that except to the extent that action has been taken based on my authorization, I may withdraw this authorization at any time by written notification to the parties involved.

Expiration Date _____ Signature _____ Date _____

Signature of Witness _____ Date _____

Financial Eligibility Verification: Required Documents

I am authorized for Publicly Funded Child Care. ___ No ___ Yes: ___ FT ___ PT Co-Pay \$ _____

All applicants requesting a scholarship must provide the following:

- ___ Copy of child's birth certificate
- ___ Completed Kindergarten Prep Scholarship Application (this form)
- ___ Completed JFS 01121

Additional forms required unless the child is on an IEP or the family is publicly funded with \$0 co-pay:

- ___ Two (2) consecutive paystubs per parent

Statement of Certification and Understanding

I certify the information provided on this application is complete and accurate. I understand the information provided will be used solely to determine eligibility for a Kindergarten Prep Scholarship.

Signature _____ Date _____

Thank you for returning this application and all required documents to Mini University. If you have any questions, please contact Saima Tahir 937.426.1414 ext 102.

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For Office Use Only

Financial Eligibility Verified: ___ Yes	___ No	Date: _____
Verified by: _____	Required Documents Provided: ___ Yes	___ No
Federal Poverty Level: ___ 0-100%	___ 101-125%	___ 126-150%
___ 151-175%	___ 176-185%	___ 186-200%
___ 201%+ (INELIGIBLE)		
Comments:		

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