



Scholarship Application Form – Calendar Year 2015

Parent's Name _____

Home Address _____

Telephone Number _____

Student's Name _____

Student's Date of Birth _____

Private School (Name/City) _____

Student Eligibility - One of the following boxes must be checked:

- The student is a Georgia resident who, immediately prior to receiving a scholarship or tuition grant and enrolling in a qualified school or program, was enrolled in and attended for at least six weeks a Georgia secondary or primary public school or who is eligible to enroll in a qualified first grade, kindergarten program, or pre-kindergarten program.
- The enrollment and six-week public school attendance requirements shall be waived in the case of a student who:
 - based on the school attendance zone of his or her primary residence, is or would be assigned to a public school that the Office of Student Achievement determines to be a low-performing school,
 - who is the subject of officially documented cases of school based physical violence or student related verbal abuse threatening physical harm,
 - who was enrolled in a home study program for at least one year immediately prior to receiving a scholarship or tuition grant.
- The student has previously been eligible for the program.

Student's Family Data – REQUIRED for statistical reporting to the Georgia Department of Revenue:

Georgia adjusted gross income from 2014 Form 500, page 2, line 10 _____

Total dependents from 2014 Form 500, page 2, line 7a _____

By signing below you certify that the above information is correct and that your 2014 Georgia Form 500 has been FILED with the Georgia DOR.

Parent or Guardian's Signature

Date

Return completed application to the private school. Families may apply for a scholarship once the student has been accepted to the private school they expect to attend. The student's financial need from all sources shall be considered in awarding a scholarship.

School use only – Calendar year 2015 Awards (Maximum allowed per student: \$8,966.00)

Scholarship Amount: _____ Approved by: _____ Date: _____

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