

EDCHOICE SCHOLARSHIP PROGRAM 2021-2022 REQUEST FORM

*****Student Data Must Match Birth Certificate*****

STUDENT INFORMATION	NAME:	(First)	(Middle)	(Last)		
	DATE OF BIRTH	LAST FOUR DIGITS SS#		GENDER:	FEMALE	MALE
	MOTHER MAIDEN NAME	NATIVE LANGUAGE:		ETHNICITY:		
	CITY OF BIRTH	GRADE LEVEL FOR 2020-2021		GRADE LEVEL FOR 2021-2022		
	IS THE STUDENT AN INCOMING KINDERGARTENER?		HAS THIS STUDENT EVER ATTENDED ANY OHIO PUBLIC SCHOOL? (Must Answer)			
	YES NO		YES NO		IF YES , WHERE: (Answer Below)	
	IS THE STUDENT AN INCOMING HIGH SCHOOLER?					
	YES NO		District:		Building: Year:	

Guardian Signing Scholarship Checks

I AM CHECK ONE	Natural Parent	Residential Parent	Legal Guardian of student applying for scholarship funds (court documents required)
	Adoptive Parent	Student is at least eighteen years of age	

PARENT/GUARDIAN	NAME:	(First)	(Middle)	(Last)	
	DATE OF BIRTH:	LAST FOUR DIGITS SS#:			
	PHYSICAL ADDRESS:				
	CITY	STATE	ZIP	COUNTY	
	PHONE	EMAIL			
	RELATIONSHIP TO STUDENT				

SECONDARY PARENT/GUARDIAN	NAME:	(First)	(Middle)	(Last)	
	DATE OF BIRTH:	LAST FOUR OF SS#			
	PHYSICAL ADDRESS:				
	CITY	STATE	ZIP	COUNTY	
	PHONE	EMAIL			
	RELATIONSHIP TO STUDENT				

*****ATTENTION EXPANSION APPLICANTS: INCOME VERIFICATION MUST BE COMPLETED TO APPLY FOR THE EDCHOICE EXPANSION SCHOLARSHIP.*****

INCOME	By checking below, you are indicating you will complete the income verification process. Please obtain the Income Verification Form from the school OR from the EdChoice website: www.edchoice.ohio.gov/edchoice .
	<p>Yes I believe that I qualify for low income status. I will submit a completed Income Verification Form and supporting documents to the EdChoice Office listed on the form.</p> <p>No I am not interested in applying for low income status. I either: 1) do not qualify for low income status or 2) do not want my income verified by the program.</p>

RETURN TO THE PRIVATE SCHOOL WITH BIRTH CERTIFICATE AND UTILITY BILL **SHOWING SERVICE & MAILING ADDRESS.**

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Information below **MUST** be completed to determine eligibility. My student is **CURRENTLY** attending a (check **ONLY** one and enter the school name).

SCHOOL INFORMATION	Public School: Charter/Community School: Private School: Home Schooled (Never Attended an Ohio School) New to Ohio Pre-School: Other: Name of public school district you live in (e.g. Elyria City, Mansfield City, etc.): Name of public school building the student would be assigned to for the 2021-2022 school year:
ADDRESS VERIFICATION	Proof of residency is required of all first-year and renewal applicants and must be submitted to the school with the application. Parents/Guardians must document residency by providing the school with a current (less than 3 months old) utility bill. The utility bill MUST SHOW MATCHING SERVICE AND MAILING ADDRESS in the name of the Parent/Guardian. Post office boxes and Cell Phone Bills have no Service Address and therefore are not accepted. <i>Acceptable Utilities</i> (must show matching service and mailing address): Electric, Gas, Water, Sewer, Cable/Internet. <i>Other Acceptable Documents</i> : Monthly mortgage statement and Lease/rental agreement (signed) and one (1) other official document with parent's name and address. Additional information can be found on the scholarship webpage.

2021-2022 EDCHOICE PARENT AGREEMENT

AGREE TO THE FOLLOWING:

- I (Parent Name)
- * The information provided in this application is true and correct.
 - * I have supplied the chartered nonpublic school with a certified copy of the student's birth certificate, copies of all custody/guardianship documentation for the student, and proof of my address.
 - * I have submitted only one EdChoice application for this student.
 - * The scholarship amount shall only be applied to the tuition of the enrolling school and I may be required to pay other fees and costs as prescribed by the policies of the school.
 - * I will sign all scholarship checks received by the private school for my student in a timely manner. I understand that if I fail to endorse the scholarship checks to the school, I will be responsible for paying the student's tuition.
 - * If I transfer my scholarship to another participating chartered nonpublic school, I will notify the school of my intent to withdraw and I will return to the original school to sign any remaining checks.
 - * I will apply for any and all financial aid or tuition discounts and adjustments made regularly available to the students attending the school in which the student is accepted for enrollment.
 - * I will abide by the Ohio Department of Education (ODE) dispute resolution process outlined in Ohio Administrative Code Section 3301-11-14.
 - * If I am not a low income parent or did not complete the income verification process, I will be responsible for paying any difference between the scholarship amount and the tuition of the chartered nonpublic school.
 - * I must inform ODE and the chartered nonpublic school of any change in the student's residential address or custody status.
 - * I will not be able to renew my child's scholarship if; our family has moved to another city school district and our new neighborhood public school is not a designated EdChoice school, my child fails to take each state achievement test required for his/her grade/level, my child has more than twenty unexcused absences during the school year, or I fail to complete the renewal process. If my child has received an EdChoice Expansion scholarship I must maintain Ohio residency and verify my income annually.
 - * I have received and understand the policy handbook of the chartered nonpublic school and will abide by its provisions.
 - * I understand that if my child's scholarship has been awarded in error, it will be terminated immediately and I would then be responsible for paying the tuition if I decide to keep my child at the private school.

I designate: _____ (Name of Private School)

to submit an application on my behalf for the Scholarship Program through the Ohio Department of Education electronic application system. BY SIGNING BELOW, I AGREE TO ALL THE ABOVE STATEMENTS.

Signature of Legal Guardian Signing the Tuition Check

Date Signed

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