

Silver State Scholarships

SCHOOL CHOICE SCHOLARSHIP APPLICATION: SCHOOL YEAR 2022/2023

Section 1: Student & School Information –

First Name: _____ Middle Initial: _____ Last: _____

Date of Birth: _____ Male Female Disabilities? Yes No
Month/Day/Year

Race: Asian Black/African American Hispanic/Latino White Mixed
Hawaiian/Pacific Islander Other _____

School you attended 2021/2022: _____

Check one: Public Charter Private Home Virtual None

School you want to attend for 2022/2023: _____

Grade entering 2022/2023: _____ Are you already registered: Yes No

Section 2: Family Information –

PRIMARY/

Parent-Guardian: Check one: Mother Father Stepmother Stepfather
Other Adult/Guardian _____

Name: _____ Social Security #: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Cell Home Work Phone: _____

Email Address: _____

Check one: Married Divorced Single Widowed Separated Remarried

Does child live primarily with you? Yes No

Current Employer: _____ Position: _____

If unemployed, date of unemployment: _____

SECONDARY/

Parent-Guardian: Check one: Mother Father Stepmother Stepfather
Other Adult/Guardian _____

Name: _____ Social Security #: _____

Address: _____ City _____ Zip: _____
(ONLY if different from primary)

Phone: _____ Cell Home Work Phone: _____

Email Address: _____

Check one: Married Divorced Single Widowed Separated Remarried

Does child live primarily with you? Yes No

Current Employer: _____ Position: _____

If unemployed, date of unemployment: _____

Section 3: Financial Information –

Number of people living in the home you (will/have) claimed on your **tax return for 2021:**

Parents/Guardians: _____ Children: _____ Other: _____ (Explain) _____

ESTIMATED Annual **Gross** Income for **2022:** *(Do not copy from last year's application.)

Parent/Guardian (Primary) Salary/Wages: _____ MONTHLY

Parent/Guardian (Secondary) Salary/Wages: _____ MONTHLY

Unemployment: _____ MONTHLY

Child Support: _____ MONTHLY Alimony: _____ MONTHLY

SNAP/Food Stamps/Housing Assistance: _____ MONTHLY

Workman's Comp/SS Disability: _____ MONTHLY

Retirement: _____ MONTHLY

Other Income: _____ How Often: _____

Describe: (ie. Business Investment, Loan, Family Assistance) _____

TOTAL Family Annual Income: _____ (above total x 12)

Is your annual income within 300% of the federally designated poverty level? Yes No

300% Federal Poverty Level – January 2022

<i>Household Size</i>	<i>Annual Income</i>		<i>Household Size</i>	<i>Annual Income</i>
2	\$54,930.00		6	\$111,570.00
3	\$69,090.00		7	\$125,730.00
4	\$83,250.00		8	\$139,890.00
5	\$97,410.00		9	\$154,050.00

For each additional family member over 9 people, add \$14,160.00.

Did or will your financial situation for 2022 change from 2021? Yes No

If yes, in what way? _____

****REQUIRED DOCUMENTS: See Procedure & Check List)**

Section 4: Grant Information –

Did the student receive a scholarship grant from Dinosaurs & Roses last year? Yes No

How much were you awarded from us last year? _____

Did or will you be applying to other Scholarship Grant Organizations for this coming school year?

Yes No *NOTE: The maximum allowable for all combined grant awards is \$8,726.00.

How much of a grant are you requesting? _____ *(Cannot be more than the school's tuition or *Silver State Scholarships* maximum of \$8,000, whichever is less.)

If your child attended private school last year, how did you get the funds to pay the tuition?

If you receive a partial grant, do you have other resources to cover the balance? Yes No

If yes, please explain _____

- I/we certify that all the information provided on the application and the supporting documentation are true, correct, and completed to the best of my/our knowledge.
- I/we authorize the release of personal financial and educational information for the purpose of determining eligibility and understand that any information provided may be independently verified.
- I/we agree that should I/we receive a scholarship; I/we will submit a written statement to Silver State Scholarships that my/our child's public or charter school has been informed that my/our child will now be attending private school.
- I/we understand that if awarded a scholarship for this year, that does not automatically entitle me/us to a scholarship in the following year.
- I/we understand that Silver State Scholarships does not discriminate on the basis of race, color, sex, age, disability, religion, nationality or political belief.
- I/we understand that Silver State Scholarships will treat my/our personal information with the utmost privacy; however, by signing this application, I/we agree to hold Silver State Scholarships harmless from any liability.

Parent/Guardian #1 _____ Date _____

Parent/Guardian #2 _____ Date _____

CHECK LIST

(Make sure all items that apply are checked off.)

- I/we have carefully read the instructions and Procedure for Grant Qualification.
- I/we have an estimated annual gross income within the 300% federal poverty level.
- I/we are currently living in the state of Nevada.
- I/we have filled out one completed application per child in my/our household.
- I/we have signed and dated all applications.
- I/we have included one set of financial documents (per family) which contains:
 - 2021 Tax Return (ONLY first 2 pages and INCLUDE dependents sheet if applicable.)
 - I/we are not required to file because my/our income is below filing requirements.
 - Last TWO regular paystubs per working parent/guardian.
 - If self-employed, last TWO business or personal bank statements which shows working income. MUST have highlighted or check marked related income (and expenses, if applicable.)
 - If I/we receive any government aid (ie. SNAP, social security, student loans/grants, housing assistance, workers compensation, disability, unemployment) the Supporting documentation is enclosed.
- I/we have included application(s), all applicable financial documents, and this checklist.
- I/we have included payment of \$25.00 for the non-refundable processing fee. (Make check payable to *Silver State Scholarships*. Cash or money orders are also acceptable. **ONE** payment per family, not for each child.) Please include child(s) name on payment.
- Mail all submissions to Silver State Scholarships at 6655 W. Sahara Ave. (#D106), Las Vegas, NV 89146. We will not accept drop-offs.
- I/we have acknowledged the submission dates posted for RETURNING and NEW families and are submitting our application package within the correct dates for consideration. It is strongly recommended that you mail your package with tracking. If you do not and it is lost, *Silver State Scholarships* will not be able to consider your application, unless you have time to resubmit with additional payment.