

Scholarship Application

Parent/Guardian N	. ,		
	mber:		
Student Name:			
Social Security Nu	mber:		
Child's Date of Birt	:h:		
Address:			
Home Phone:			
Cell Phone:			
Email address:			
Name of Current s	chool/daycare:		
·	of current teacher or admin		
	ı about the possibility of you		s Garden
Are you prepared	to be an active and involved	l parent in our school c	ommunity? Y / N
Which volunteer o	pportunities interest you (ci	rcle one or many)?	
House Parent	Fundraising Committee	Garden Committee	Other

Please return to Julia's Garden Scholarship Fund 1700 S. 3rd St. 78704

Is there any other information that we should know about you and/or your child?			

Please submit the following to be considered for a full or partial scholarship:

- 1. Completed application form (feel free to attach additional pages if needed)
- 2. Verification of need. Please provide a copy of the prior year's (2017) tax return

Demonstration of need

In accordance with Federal Income Eligibility guidelines (250% of Federal Poverty Guidelines) proof of the following demonstrates need

"Income" is defined as income before any deductions and should include: (1) Monetary compensation for services, including wages, salary, commissions or fees; (2) net income from nonfarm self-employment; (3) net income from farm self-employment; (4) Social Security; (5) dividends or interest on savings or bonds or income from estates or

Household Size	Annual Household Income
2	\$41,150
3	\$51,950
4	\$62,750
5	\$73,550
6	\$84,350

trusts; (6) net rental income; (7) public assistance or welfare payments; (8) unemployment compensation; (9) government civilian employee or military retirement, or pensions or veterans payments; (10) private pensions or annuities; (11) alimony or child support payments; (12) regular contributions from persons not living in the household; (13) net royalties; and (14) other cash income. Other cash income would include cash amounts received or withdrawn from any source including savings, investments, trust accounts and other resources that would be available to pay the price of a child's meal. "Income," as the term is used in this Notice, does not include any income or benefits received under any Federal programs that are excluded from consideration as income by any statutory prohibition.

https://www.federalregister.gov/documents/2018/01/18/2018-00814/annual-update-of-the-hhs-poverty-guidelines