



**EITC PRE-KINDERGARTEN SCHOLARSHIP
APPLICATION FOR FAMILIES
2019-2020**

CURRENT HOUSEHOLD INFORMATION:

1. List the name and Social Security numbers for parents/guardians and child(ren) applying for aid:
 - 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
2. How many children under the age of 18 (dependents) lived in your household during the 2018 tax year? _____
3. Are you Single, Married, divorced, or Separated? _____
4. How many other adults over the age of 18 (not dependent) resided in your household during the 2018 tax year? _____
5. What was the adjusted gross income for your household for the 2018 tax year?
_____ (Please attach W2, Federal Tax Return and PA State Tax Return)
6. Who claimed student(s) as a tax dependent(s) in 2018? _____
7. Please list any child support you paid or received during the 2018 tax year:

8. Please list all non-taxable income received in 2018:
 - 1) Cash Assistance (TANF): _____ per year
 - 2) Food Stamps: _____ per year
 - 3) Social Security Income (SSA/SSD): _____ per year

4) Housing Assistance (Sec. 8): _____ per year

5) Other (Workers Comp, disability, etc.): _____ per year

9. Do you rent or own your residence? _____

1) If renting, what is the monthly rental payment? _____

2) If you own what is the monthly mortgage payment? _____

10. Please list your child(ren), the grade he/she will be in for the 2019-2020 school year and the school(s) your child(ren) will attend for the 2019-2020 academic year:

1) _____

2) _____

3) _____

4) _____

11. Ethnicity (Check-Optional):

AfricanAmerican____Asian____Caucasian____Hispanic/Latino____Native
American____Bi-Racial____

12. Please explain any unusual and/or difficult circumstances that apply to your family situation during the past 12 months.

I certify that our household income in 2018 was less than \$85,000.

Name _____ (Print Name)

Name _____ (Signature)

Address _____

Phone _____ Email _____

Date _____

I, _____, do hereby certify, swear and affirm that the information entered in this three page form is true and correct to the best of my knowledge and belief.

_____ (Print Name)

_____ (Signature)

_____ Date

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF DAUPHIN

On this, the _____ day of _____, 2019, before me, a notary public, the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that (s)he executed the same for the purpose therein contained.

In witness whereof, I have here
unto set my hand and seal.

(SEAL)