

First Presbyterian Preschool

Scholarship Application

2024-2025

First Presbyterian Preschool is excited be able to offer scholarships to families enrolled in the preschool program. These funds are made available using the Preschool Angel Fund. A percentage of the Angel Fund will be devoted to awarding scholarships each year.

Program Details

* Scholarship application deadline is **March 8, 2024**
* Students must be enrolled in the Preschool program to be eligible for the scholarship. The student’s online registration must be completed, including payment of the registration fee of $150 and the supply fee (excluding VPK) of $100, in order to preserve the child’s enrollment
* Scholarship funds will be paid directly to First Presbyterian Preschool
* All scholarship recipients will be asked to complete a program agreement
* If any information is falsified on this application or supporting documentation, the scholarship will immediately be revoked and all monies dispersed must be returned to the Preschool for deposit in the Angel Fund

Eligibility Requirements

* The child must be age eligible for a Preschool program being offered by First Presbyterian Preschool
* All students eligible for state funding through the Voluntary PreKindergarten (VPK) program must first apply for the VPK voucher. VPK wrap around services are eligible for payment with scholarship funds
* A family must meet the income guidelines as established and must provide supporting documentation. Documentation must be presented for all persons contributing to the household family income

|  |  |
| --- | --- |
| Household Size | Maximum Family Income |
| 2 | $29,580 |
| 3 | $37,290 |
| 4 | $45,000 |
| 5 | $52,710 |
| 6 | $60, 420 |
| 7 | $68,130 |
| 8 | $75,840 |
| For each additional person | $7,920 |

Application Process

* Complete the First Presbyterian Preschool Scholarship Application and submit by March 8, 2024 for the 2024-2025 school year; information can be mailed to the following address:

First Presbyterian Preschool

250Sixth St S

Naples, FL 34102

* Applicants must submit a copy of the most recent income tax form
* If applicant is attending school, documentation of school enrollment must be submitted along with the scholarship application
* Scholarship applications will be reviewed by the Preschool Application Review Committee
* All applicants will be notified of the Committee’s decisions by April 12, 2024
* Applicants who are approved for scholarships will receive a Scholarship Agreement. The Agreement must be completed and returned by April 26, 2024; if the agreement is not received by the deadline, the scholarship is considered null and void and the family will be responsible for making all tuition payments as outlined in the Preschool Tuition Agreement
* Incomplete applications or those received after the deadline cannot be reviewed by Review Committee
* Decisions of the Review Committee are based on family income eligibility
* All information received during the scholarship process will be kept confidential, with applications being presented to the Review Committee blindly
* Our financial assistance fund is limited, and while we will review all applications that are received by the deadline that meet the income guidelines, we cannot guarantee that all applicants will receive assistance
* Scholarships may be awarded for a full year or a partial year



**OFFICE USE ONLY**

Date received: \_\_\_\_\_\_\_\_

Date reviewed by committee: \_\_\_\_\_\_\_\_\_\_

Application # \_\_\_\_\_\_\_\_\_

First Presbyterian Preschool

Scholarship Application

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program in which the child is enrolled (i.e. 3 year old, 3 days a week): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (including city and zip): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Monthly Income: \_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (including city and zip): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Home Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Monthly Income: \_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_

Child lives with: Mother Father Both Other: \_\_\_\_\_\_\_\_\_\_\_\_\_

Family Size: \_\_\_\_\_ Adults \_\_\_\_\_ Children

Total Family Income: (including all members contributing to the income of the household) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you or anyone in your household receive additional financial assistance from any of the following?

Unemployment: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alimony: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child Support: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please explain any special financial circumstances affecting the family’s budget at this time.

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Please explain how you feel a relationship with First Presbyterian Preschool would benefit your child and family.

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Are you able to contribute any finances to your child’s monthly tuition? Y N

If so, how much? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you requesting a:

Full Scholarship Partial Scholarship

Is your enrollment at First Presbyterian Preschool contingent upon the receipt of scholarship funds? Y N

\*Should scholarship funds not be available, the registration fee of $150 and the supply fee of $100 will be refunded if the parent/s desire to have the child removed from the enrollment list. **Requests must be made in writing and must be received by June 28, 2024.**

I hereby certify that all the information contained in this application is true and correct. **In addition, I have attached a copy of my most recent income tax form**. Scholarship requests will not be considered without appropriate documentation. Financial documentation will be used solely to determine eligibility. I also understand that any misrepresentation of the information contained in this document does constitute fraud and will, therefore, deem this application null and void.

Signature of Parents or Guardians: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_