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**MARY E. PHILLIPS and WENDI HIRSHBERG MEMORIAL**

**SCHOLARSHIP FUND APPLICATIONS—CONFIDENTIAL**

The Mary E. Phillips Scholarship Fund and the Wendi Hirshberg Memorial Fund are supported and administered by the South Seattle College’s Parent Advisory Council (PAC). Scholarships are awarded to families that would not otherwise be able to participate.

**WHO IS ELIGIBLE and HOW IS FINANCIAL NEED DETERMINED?**

* Current members in good standing and active participants
* New members committing to active participation
* Financial need is demonstrated
* Application is submitted on time each quarter

The chart from Seattle Public Schools provides the guidelines. If a family income exceeds the figures on the chart, consideration may be given to special financial circumstances.

Applications are reviewed by a small confidential committee. The application is seen only by the committee and your Parent Instructor. If awarded, your Class Treasurer and Site Treasurer will also be aware of the scholarship amount awarded (they will not see your application).

**HOW TO APPLY and AMOUNTS AWARDED:**

Fill out this form completely. ***Save your documentation because application must be made each quarter requiring assistance.*** Return completed form to your Parent Instructor *before* the below deadlines:

***Fall – September 25th, Winter – November 25th, Spring – February 25th***

Scholarships are generally awarded for ***half*** of the monthly tuition amount but in some circumstances can provide more.

**NEXT STEPS:**

* Notify your Treasurer that you have applied--or note this on your tuition check.
* *Continue to pay at least half of the current tuition until a decision is made.*
* You will receive an email/letter outlining whether you will receive a scholarship and the amount.
* Any differences in payment due or over payment will be adjusted by the treasurer.

**Seattle Public Schools Guidelines: INCOME CHART (Expires June 30, 2025)**

| **FamilySize** | **Yearly Gross Income** | **Monthly Gross Income** | **Twice Per Month Gross Income** | **Every 2 Weeks Gross Income** | **Weekly Gross Income** |
| --- | --- | --- | --- | --- | --- |
| 1 | $26,973 | $2,248 | $1,124 | $1,038 | $519 |
| 2 | $36,482 | $3,041 | $1,521 | $1,404 | $702 |
| 3 | $45,991 | $3,833 | $1,917 | $1,769 | $885 |
| 4 | $55,500 | $4,625 | $2,313 | $2,135 | $1,068 |
| 5 | $65,009 | $5,418 | $2,709 | $2,501 | $1,251 |
| 6 | $74,518 | $6,210 | $3,105 | $2,867 | $1,434 |
| 7 | $84,027 | $7,003 | $3,502 | $3,232 | $1,616 |
| 8 | $93,536 | $7,795 | $3,898 | $3,598 | $1,799 |
| For each additional family member, add: | +$9,509 | +$793 | +$397 | +$366 | +$183 |

**QUARTER APPLICATION: check one**

*FALL* (Sept. Oct. Nov.)\_\_\_\_\_\_\_ *WINTER* (Dec. Jan. Feb.)\_\_\_\_\_\_\_ *SPRING (*Mar. Apr. May)\_\_\_\_\_\_\_

**PRESCHOOL INFORMATION**

Currently enrolled in: Preschool Site\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Monthly tuition amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Yes or No)

**FAMILY INFORMATION**

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s Age\_\_\_\_\_\_\_\_\_\_\_\_\_

 (first) (last)

Parent’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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E-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(print clearly)

**FINANCIAL INFORMATION**

Applicant’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of hours worked per week\_\_\_\_\_\_\_\_\_\_\_

Partner’s Name (if applicable)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of hours worked per week\_\_\_\_\_\_\_\_\_\_\_

Number of people living in the household\_\_\_\_\_\_\_\_ Ages of children in family\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other dependents\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Income** | **Expenses** |
| ***Applicant’s Monthly Gross******Income*** (before taxes) | Housing (mortgage or rent) |
| ***Partner’s Monthly Gross*** ***Income*** (before taxes) | Bank Loans  |
| Social Security Income | Credit Cards |
| Unemployment | School Loans |
| Pension | Child Support Payments |
| Welfare | Medical Bills |
| Disability | Insurance |
| Child Support | Car Payment/Gas |
| Other | Utilities/Phone/Internet |
|  | Food |
|  | Child’s Class and Activity Fees (Not Including Co-op Tuition) |
|  | Other |
| **Total Income:**  | **Total Expenses:** |

**Circumstances that affect your family's financial situation at this time (explain fully)**

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**What is the amount that you feel you could pay monthly after receiving financial support? \_\_\_\_\_\_**

**PROGRAM PARTICIPATION**

How long have you been involved in Co-op Preschool? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your Co-op job? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many Parent Meetings have you attended so far this year/last year? \_\_\_\_\_\_ Or what arrangements for absences have you made with your Parent Educator or Class Chair? \_\_\_\_\_\_\_\_\_\_

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Which Parent Education Seminars have you attended so far this year/last year? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How have/will you support fundraising efforts of your preschool and the Parent Advisory Council?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How does your child benefit from involvement in your Co-op Preschool? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How do you and your family benefit from involvement in your Preschool and Parent Education?

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Snack Assistance:** As part of co-op you will be responsible to bring snack for your class on a rotating schedule. Please check the statement that applies to your situation if awarded assistance:

\_\_\_\_\_\_\_Yes, I would like a $25.00 gift card to Safeway for this quarter to help with purchasing snack.

\_\_\_\_\_\_\_No thanks, I won’t be needing a gift card.

I certify that the information I have provided on the following application form is correct. If this request is accepted, I agree to fulfill the obligations of a participating member in a parent cooperative preschool.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This section is to be filled out by the Parent Education Instructor**

Instructor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe the applicant’s involvement in the group, such as: attendance at preschool, meetings, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please provide any additional information.

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(*Signature of Instructor) (Date)*

*(Revised August 2024)*