

CLEVELAND SCHOLARSHIP PROGRAM REQUEST FORM 2023-2024

	Student data MUST match the Birth Certif	ficate		
STUDENT INFORMATION	NAME:	(Middle)	(Last)	
	DATE OF BIRTH:	GRADE LEVEL on Ja		
	GENDER: ☐ FEMALE ☐ MALE	CITY OF BIRTH:		
	LAST FOUR DIGITS SS#:	MOTHER'S MAIDEN NAME:		
	NATIVE LANGUAGE:	ETHNICITY:	ETHNICITY:	
	HAS THE STUDENT EVER ATTENDED ANY OHI			
	DISTRICT:	BUILDING:	YEAR:	
PARENT/GUARDIAN SIGNING SCHOLARSHIP CHECKS				
I AM THE (CHECK ONE) Natural Parent Residential Parent Student who is at least eighteen years of age				
☐ Legal Guardian of student applying for scholarship funds (court documents required)				
z				
PRIMARY PARENT/GUARDIAN	NAME: (First)	(Middle)	(Last)	
	DATE OF BIRTH:	LAST FOUR DIGITS OF SSN:		
	CITY:	STATE: ZIP CODE:		
		EMAIL ADDRESS:		
<u> </u>	RELATIONSHIP TO STUDENT:			
SECONDARY RENT/GUARDIAN	NAME:	0.000		
			(Last)	
		LAST FOUR DIGITS OF SSN:		
	PHYSICAL ADDRESS:	STATE: ZIP CODE:		
		EMAIL ADDRESS:		
PA	RELATIONSHIP TO STUDENT:			
Information MUST be completed to determine eligibility.				
SCHOOL INFORMATION	My student is currently (Check only one box):	mine engionity.		
	Attending a public school	☐ Attending a charter/community scl	nool	
	☐ Attending a private school	☐ Homeschooled (Never attended a		
	New to Ohio	☐ Attending Pre-school		
	Other:	-		
	Name of School the student is currently attending:			

Return to the private school with student's birth certificate and a current utility bill showing <u>matching</u> service and mailing addresses.





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***ATTEN choose to	TION: Income verification is not required to apply for a Cleveland Scholarship. Families of students in grades K-8 may qualify for low-income status if they have their income verified for the Cleveland Scholarship. ***			
INCOME	***Check below to indicate your intent to complete the income verification process.***			
Ž	□ No , I am not interested in applying for low-income status. I either: 1) do not qualify for low-income status; or 2) do not want my income verified by the program.			
ADDRESS VERIFICATION	***Proof of residency is required of all first year and renewal applicants and must be submitted to the school with the application.***			
	Parents/Guardians must document residency by providing the school with a current (less than 90 days old) utility bill. The utility (electric, gas, water, sewer, cable/internet) bill <u>must show matching service and mailing address</u> in the name of the parent/guardian. Post office boxes (except in rural areas where residents only have a PO Box) and cell phone bills have no service address and therefore are not accepted.			
ADD VERIFI	Other Acceptable Documents: A monthly mortgage statement (less than 90 days old) or lease/rental agreement (signed by lessee and lessor) and a piece of current business mail (examples: pay stub, bank statement, insurance statement, car payment statement, etc.) with parent/guardian's name and address. ***Additional information can be found on the scholarship webpage.***			
	2023-2024 CLEVELAND PARENT AGREEMENT			
	I AGREE TO THE FOLLOWING:			
	(Parent Name)			
•	The information provided in this application is true and correct. I have supplied the chartered nonpublic school with a certified copy of the student's birth certificate, copies of all custody/guardianship			
documentation for the student, and proof of my address.				
•	I have submitted only one Cleveland Scholarship application for this student.			
The scholarship amount shall only be applied to the tuition of the enrolling school, and I may be required to pay other fees and costs as				
•	prescribed by the policies of the school. I will sign all scholarship checks received by the private school for my student in a timely manner. I understand that if I fail to endorse the			
	scholarship checks to the school, I will be responsible for paying the student's tuition.			
•	If I transfer my scholarship to another participating chartered nonpublic school, I will notify the school of my intent to withdraw and I will return to the original school to sign any remaining checks.			
•	 I will apply for any and all financial aid or tuition discounts and adjustments made regularly available to the students attending the school in which the student is accepted for enrollment. 			
•	• If I am not a low-income parent or did not complete the income verification process or I am a parent of a high school student (9-12), I will be responsible for paying any difference between the scholarship amount and the tuition of the chartered nonpublic school.			
•	I must inform ODE and the chartered nonpublic school of any change in the student's residential address or custody status.			
•	 I will not be able to renew my child's scholarship if: 1) my family moves to another city school district); 2) my child does not complete all required assessments; or 3) I fail to complete the renewal process. 			
•				
•	I understand that if my child's scholarship has been awarded in error, it will be terminated immediately, and I would then be responsible for paying the tuition if I decide to keep my child at the private school.			
	I designate to submit an application on my behalf for the Scholarship Program (Name of Private School)			
	(Name of Private School)			
	through the Ohio Department of Education's electronic application system. By signing below, I agree to the above statements.			

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Date Signed

Signature of Parent/Legal Guardian signing the tuition check