



## CLEVELAND SCHOLARSHIP PROGRAM RENEWAL FORM 2023-2024

|   |  |   |
|---|--|---|
| <b>STUDENT<br/>INFORMATION</b>  | <b>***Student data MUST match the Birth Certificate***</b> |   |
|   | NAME: _____<br>(First) (Middle) (Last)                     |   |
|   | DATE OF BIRTH: _____                                       | GENDER: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE |
|   | GRADE STUDENT WAS IN ON JANUARY 1, 2023: _____             |   |
|   | SCHOOL CURRENTLY ATTENDING: _____                          |   |
| <b>PARENT/GUARDIAN SIGNING SCHOLARSHIP CHECKS</b>   |  |   |
| I AM THE (CHECK ONE <input type="checkbox"/> Natural Parent <input type="checkbox"/> Residential Parent <input type="checkbox"/> Adoptive Parent <input type="checkbox"/> Student who is at least eighteen years of age<br><br><input type="checkbox"/> Legal Guardian of student applying for scholarship funds (court documents required) |  |   |
| <b>PRIMARY<br/>PARENT/GUARDIAN</b>  | NAME: _____<br>(First) (Middle) (Last)                     |   |
|   | DATE OF BIRTH: _____ LAST FOUR DIGITS OF SSN: _____        |   |
|   | PHYSICAL ADDRESS: _____                                    |   |
|   | CITY: _____ STATE: _____ ZIP CODE: _____                   |   |
|   | PHONE NUMBER: _____ EMAIL ADDRESS: _____                   |   |
|   | RELATIONSHIP TO STUDENT: _____                             |   |
|   |  |   |
| <b>SECONDARY<br/>PARENT/GUARDIAN</b>  | NAME: _____<br>(First) (Middle) (Last)                     |   |
|   | DATE OF BIRTH: _____ LAST FOUR DIGITS OF SSN: _____        |   |
|   | PHYSICAL ADDRESS: _____                                    |   |
|   | CITY: _____ STATE: _____ ZIP CODE: _____                   |   |
|   | PHONE NUMBER: _____ EMAIL ADDRESS: _____                   |   |
|   | RELATIONSHIP TO STUDENT: _____                             |   |
|   |  |   |



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**\*\*\*ATTENTION:** 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 choose to have their income verified for the Cleveland Scholarship.\*\*\*

### INCOME

**\*\*\*Check below to indicate your intent to complete the income verification process.\*\*\***

- ☐ **Yes**, I believe that I qualify for low-income status. To complete the Income Verification process, parents may submit online using the [secure Income Verification system](#) or complete and mail the [paper form](#). Emailing documents is not permitted.
- ☐ **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 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 **must show matching service address and mailing address** 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.

*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 have received and understand the policy handbook of the chartered nonpublic school and will abide by its provisions.
- 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)

through the Ohio Department of Education's electronic application system. By signing below, I agree to the above statements.

\_\_\_\_\_  
Signature of Parent/Legal Guardian signing the tuition check

\_\_\_\_\_  
Date Signed

Return to the private school with a copy of current utility bill showing matching service and mailing addresses.