



## Scholarship Application

### Scholarship Goal

To provide a Christian preschool experience for children whose families cannot afford full preschool tuition fees.

### Scholarship Parameters

Scholarship funds will be distributed on a first come, first served basis to eligible families after review by the Preschool Scholarship Team. Funds awarded will be directly put toward preschool tuition for Haven's Little Treasures Christian Preschool.

### Program Details

- The student's registration information must be submitted on Cheddar Up, including the scholarship registration fee of \$25 (using the code Scholarship23), to reserve the child's enrollment. If the scholarship money is not available, the \$25 will be refunded if there is a desire to have the child removed from the enrollment list.
- Scholarships will be applicable for one school year (September-May). Applicants will need to reapply each year if assistance is still needed.
- Families will be asked to contribute toward tuition.

### Eligibility Requirements

- The child must be eligible for preschool (3 or 4 by September 1).
- The child must be potty-trained.
- Families must meet the established income guidelines or have special financial circumstances. Supporting documentation must be presented for all persons contributing to the household family income.

Household Size	2	3	4	5	6+
Adjusted Gross Income Under	\$35,000	\$40,000	\$45,000	\$50,000	\$55,000

### Application Process

- Complete both the Haven's Little Treasures Christian Preschool Registration online and Scholarship Application. \*

The scholarship application may be dropped off at the front office, emailed to [ssanders@haven-church.org](mailto:ssanders@haven-church.org), or mailed to:

Haven's Little Treasures Christian Preschool  
 5350 North Sprinkle Road  
 Kalamazoo, MI 49004  
 Attn: Sandy Sanders

- Applicants must submit a copy of their most recent income tax return form.
- Scholarship applications will be reviewed by the Preschool Scholarship Team. Incomplete applications will not be reviewed.
- All applicants will be notified of the scholarship decision.
- Decisions of the Preschool Scholarship Team are based on the order in which the applications are received and eligibility requirements.
- All information received during the scholarship process will be kept confidential.
- Our Scholarship Fund is limited, and while we review all applications that meet the requirements, we cannot guarantee that all applicants will receive assistance.

For questions, please contact Sandy Sanders at [ssanders@haven-church.org](mailto:ssanders@haven-church.org) or 344-5871.

**\*In order to hold your child's spot, the scholarship application must be returned within one week of the initial online registration date. If the application isn't submitted within one week, your child's name will be taken off the class list and your \$25 deposit will be returned to you.**

**CHILD INFORMATION**

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

**PARENT/GUARDIAN 1 INFORMATION**

Full Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**PARENT/GUARDIAN 2 INFORMATION**

Full Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**FAMILY INFORMATION**

How do you believe your child would benefit from attending Haven's Little Treasures Christian Preschool program? \_\_\_\_\_

Why are you seeking a scholarship? \_\_\_\_\_

Child lives with: Guardian 1 \_\_\_\_\_ Guardian 2 \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_

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

Household Adjusted Gross Income (amount earned before taxes and deductions): \_\_\_\_\_

Indicate below if anyone in your household receives additional financial assistance.

Unemployment \_\_\_\_\_ Child Support \_\_\_\_\_ Alimony \_\_\_\_\_

Social Security \_\_\_\_\_ Other \_\_\_\_\_

Please explain any special financial circumstances currently affecting the family's budget.

We ask that every family make a personal investment in their child's preschool education. How much of the total cost of preschool tuition would you be able to contribute?

**SIGNATURE**

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 return form. I also understand any misrepresentation of the information contained in this document may result in our application being denied.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_