

Scholarship Application Explanation and Process

The Peopleplace board of directors voted to update the scholarship application for the school year 2024-2025. The application asks for information about income, expenses, assets, and liabilities so that families have the opportunity to give the scholarship committee pertinent and accurate information about their financial situation. Whatever information you share will be confidential. A formula will get applied to the information provided and automatically generate the amount you are awarded. If you leave certain lines blank that may affect your scholarship amount.

To ensure the process remains confidential, you may print out the form from our website, fill it out, put it in an envelope addressed to "bookkeeper" and put that into the black box on the front porch at Peopleplace.

The only person who will see the information on the application is the bookkeeper. The Peopleplace bookkeeper is a licensed CPA who is required to uphold high ethical standards and confidentiality.

Once the bookkeeper applies the formula to the information provided, it is passed on to the scholarship committee for a blind review. The scholarship committee determines any other extenuating circumstances and makes the final decision on how much is awarded to each family.

The scholarship formula takes into account income, expenses, assets, liabilities, number of people in the household, and the child's schedule. The goal of the committee is to make sure the process is equitable and that nobody feels uncomfortable asking for financial assistance - especially if cost is a prohibitive factor in a child attending. The Peopleplace director, staff, families, and board of directors understands the high cost of child care and preschool and considers access to Peopleplace by a diverse population beneficial to all. If you have any questions about this process or how to apply, please don't hesitate to send an email to office@peopleplacecoop.org. You can find our scholarship application on our website at www.peopleplacecoop.org.

Application #:	Date Received:



Scholarship Application

Child's Name:					
Home Address:					
Program Child is Enrolled in:	(if known)				
Toddler: 5 days	3 days	3	2 days		
Upstairs: 5 days	3 days	3	2 days		
			(Please circle)		
Extended Day until 3 PM:	Mon	Tue	Wed	Thurs	Fri
Extended Day until 5 PM:	Mon	Tue	Wed	Thurs	Fri
Desired schedule if unknown:					
PARENT & HOUSEHOLD IN	FORMATION				
Parent/Guardian #1 Name: _					
Relationship to Child: Occupation:					
Parent/Guardian #2 Name: _					
Relationship to Child:		_ Occup	oation:		
Number of Members in the H	ousehold:				

FINANCIAL INFORMATION:

Please do your best to provide accurate information or estimates as needed. If you would like any help filling out this form or finding information, please contact Amelia Patel (amelia@peopleplacecoop.org).

	Combined Parents			
Income:				
Adjusted Gross Income reported on most recent tax return filed with the IRS				
Untaxed Income and Benefits (e.g. Social Security, TANF, child support, Veteran's benefits)				
Estimated Adjusted Gross Income for Current Year				
Expenses:				
Child Support that you PAY to another because of divorce or separation				
Monthly Mortgage or Rent				
Monthly Automobile Payments				
Average Monthly Utility Payments				
Monthly Medical Debt Payments				
Monthly Insurance Expenses (e.g. medical, car, home, renter)				
Assets:				
Cash, Savings and Checking Balances				
Other Non-Retirement Investments (Including Mutual Funds, CDs, Trusts, Money Markets, etc)				
Other Taxable Balances				
Current Value of Real Estate (not including primary residence)				
Fair Market Value of Primary Residence				
Fair Market Value of Automobile(s)				
Debts and Liabilities:				
Amount Owed on Home				
Amount Owed on Automobile				
Amount of Medical Debt				
Amount of Other Debt (please specify - student loans, credit				

card/consumer, etc.)			
If grandparents or other family members expect to help with	th costs, h	ow much will they p	provide?
Are you receiving any tuition assistance or child care subs	sidies from	elsewhere?	Yes/No
If yes, how much?			
As parents, how much do you feel you can contribute to yo	our child's	school expenses?	
ADDITIONAL INFORMATION			
Do you expect any of the following to occur in the nex	xt year?		
A change in marital status?	Yes/No		
A change in the number of dependents?	Yes/No		
A substantial change in your income?	Yes/No		
A substantial change in your assets?	Yes/No		
Please provide details for all YES responses.			

^{**}PLEASE ATTACH COPIES OF YOUR MOST RECENT FULL FEDERAL INCOME TAX RETURN**

^{**}Please note that we reserve the right to adjust your award if your circumstances change or if other funding becomes available from other assistance programs.**

Please help us understand your particular need for scholarship, such as additional burden on your
income, employment status, additional monthly household budget information, etc. Include any
information that you feel is pertinent to our decision: