

PARENTS/GUARDIANS: PLEASE SUBMIT THE APPLICATION TO THE SCHOOL.



Scholarship Application Form

COMPLETE ONE APPLICATION PER STUDENT. PLEASE PRINT OR TYPE.

For School Year: 2014-15

Grade in August 2014: _____

Gender: Male Female

Student Name: _____

Catholic school applied to: _____ City: _____

School attended in 2013-14: _____ City: _____

Student's Address: _____

City, State, Zip: _____

Parent/Guardian Name(s): 1. _____ 2. _____

Parent/guardian #1 should be the parent/guardian with the best daytime availability to go to the school to sign documents.

Telephone: _____ E-mail: _____

CERTIFICATION

By my/our initial(s) and signature(s), I/we affirm and certify that the following statements are true and correct:

- _____ **For all students.** I/we are the parent(s) or guardian(s) of the above referenced student. This student resides with me/us in the State of Georgia. I/we have attached **proof of residence which documents residency at the address given above.** (Acceptable proofs of residence include a copy of a parent/guardian's Georgia driver's license or other form of government issued photo ID card, a recent utility bill, rent receipt, or voided check with address.)
- _____ **For all students.** I/we have submitted an application to the financial aid company used by the school to determine calculated financial need, and the school has received **evidence of the financial aid application.**
- _____ **For students entering 2nd grade or above and transferring from a public school.** The student referenced above is transferring directly from a Georgia public school. I/we have attached a copy of the student's public school transcript or latest report card as **evidence of public school attendance.** (Transcript or report card should show school's name and address and name of school system.)
- _____ **For students entering 2nd grade or above and transferring from another non-public school.** A student is exempt from the public school transfer rule and is eligible to apply for GRACE assistance if the student had been receiving SSO assistance at the previous school. **I/we understand that the GRACE school will ask that GRACE Scholars to request a letter of verification from an official of the SSO.**
- _____ **For students entering 2nd grade or above and transferring from home schooling.** A student is exempt from the public school transfer rule and is eligible to apply for GRACE assistance if the student has been participating in a home school program registered with the Georgia Department of Education (DOE) for at least one year prior to receiving prior to receiving an SSO award. **I/we certify that the above referenced student meets the eligibility requirements for home schooled students and have attached of the declaration of intent and yearly attendance report submitted to the DOE for the most recent school year.**

Signature: _____ Date: _____

Signature: _____ Date: _____

For school use. Date received:

- _____ Proof of Georgia residence _____ Calculated financial need
- _____ Proof of public school attendance or proof of previous SSO funding (2nd grade and above)
- _____ Evidence that financial aid application has been submitted

Revision date: 9/3/13