

## 2020-2021 SGO Scholarship Application



### SGO Scholarship Application Information

Does your child who is entering Kindergarten-12<sup>th</sup> grade meet all of the following criteria?

- Live in Indiana
- Meet the Income Eligibility Guidelines (Attached)
- Currently attend or is applying to a private school grades K-12

If so, your child is eligible to apply for an SGO Scholarship from the Community Foundation of Elkhart County. If selected, the scholarship will pay a portion of tuition. (Scholarship amounts may not be known until after the application process is complete.)

**Students must reapply each year to receive the Community Foundation of Elkhart County SGO Scholarship.**

### SGO Scholarship Application Instructions

1. Complete this application.
2. Before January 15, 2021: Attach a copy of your signed 2019 Federal 1040 tax return.
3. After January 15, 2021: Attach a copy of your signed 2020 Federal 1040 tax return.
4. Married couples filing separately must submit **both** 1040 forms.

If your child is awarded a scholarship, Community Foundation of Elkhart County will pay the scholarship directly to the school. You must pay your portion of the tuition when it is due. All applications are subject to approval of admission guidelines to the school of your choice. Scholarships are limited.

### SGO Scholarship Application Deadlines

**Fall Deadline:** October 15, 2020

**Winter Deadline:** January 15, 2021

**Spring Deadline:** May 17, 2021

Return this application form and a copy of your income documentation to the school before the above dates so the school can submit to the Community Foundation of Elkhart County by the deadline. Although applications will be accepted up to the deadlines, Community Foundation of Elkhart County would prefer to receive applications sooner due to high volume of applications that need to be processed.

## Student SGO Scholarship Application Form

*Note: Please fill out a separate application for each child. The application must be completely filled out and signed by the parent. All applications must be accompanied by income documentation.*

**STUDENT**

Student First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Level as of Sept. 1, 2020: \_\_\_\_\_

Name and County of Last School Attended (2019-2020 School Year):  
\_\_\_\_\_

Name and County of Nonpublic School Applying for (2020-2021 School Year):  
\_\_\_\_\_

Has the student received an SGO Scholarship in the past (Yes or No): \_\_\_\_\_

**PARENT/GUARDIAN**

Parent(s) or Guardian(s) Name: \_\_\_\_\_

Number of Household Members: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

### Attention Parent or Guardian

**Please read and place your initials next to each statement indicating that you understand and meet each requirement listed below to qualify.**

\_\_\_\_\_ I verify that the income and household size information provided is both accurate and current.

\_\_\_\_\_ My child qualifies within the Community Foundation of Elkhart County's income guidelines.

\_\_\_\_\_ My child lives in Indiana.

\_\_\_\_\_ As this child's parent/guardian, I pledge to keep current on tuition and fee payments to the school my child attends.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SCHOOL**

*By signing this section, the School Administrator verifies that this student has met guidelines for admission, is/will be enrolled, and has attached the necessary proof of current income and household size.*

School Administrator Name: \_\_\_\_\_

School Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## SGO Scholarship Application Checklist

- ☐ I have filled out the application completely.
- ☐ I have attached income documentation (Federal 1040 Tax Return) with my application.

## SGO Scholarship Income Eligibility Guidelines

(July 1, 2020 – June 30, 2021)

You are eligible for a Community Foundation of Elkhart County SGO Scholarship if your family's adjusted gross income does not exceed the guidelines outlined in the table below.

Household Size*	Adjusted Gross Income**
1	\$47,212
2	\$63,788
3	\$80,364
4	\$96,940
5	\$113,516
6	\$130,092
7	\$146,668
8	\$163,244
9	\$179,820
10	\$196,396
<i>Each additional</i>	<i>\$16,576</i>

\* Includes all adults and children; usually matches your federal tax return exemptions

\*\* Income eligibility is subject to verification