

**Scholarships for Kids
2026-2027 Scholarship Application**

All applications should be submitted to the participating school the student plans to attend for the 2026-2027 academic year.

SCHOOLS: Use the checklist below to confirm all requested and necessary documentation has been provided. Requested documentation is mandatory for the application to be considered complete.

Parent responsibility amounts (PER STUDENT):
\$500 - K-12th grade

Renewal Groups -
Group A: Last income check 25/26, or first award 25/26
Group B: Last income check 24/25 - Due for an income check

GROUP A - Express Renewal - No income check

This renewal application packet should include:

- _____ Application
 - _____ Most recent report card
 - _____ Verification of assigned school from the applicable city or county school board office
- *This must be current for reporting purposes.**

Scholarship limit:
Up to \$10,000 K-12th
*Consistent with school tuition and fees.

Applications submitted without required documentation will be placed on HOLD. Renewal applications placed on hold do not receive deadline priority and may be considered after the standard deadline, subject to funding availability. Parents may request a copy of this coversheet for confirmation of submission.

Do not submit this page with the application.

FOR SCHOOL USE

Submitted by: _____

Date: _____

2026/2027 Assigned School: _____

Is the assigned school ZONED PRIORITY? Yes or No

STUDENT NAME: _____

STUDENT ID: _____

Ethnicity: _____

Sex: ___M ___F ___Other

Birthdate: _____ Age: _____

Social Security #: _____

*PLEASE PROVIDE CONTACT INFORMATION FOR BOTH PARENTS.
IF THE CHILD LIVES WITH A GUARDIAN OR IS A WARD OF THE STATE, DOCUMENTATION
MUST BE PROVIDED.*

APPLICANT'S ADDRESS:	With whom does the student reside? (circle one) PARENT(S) GUARDIAN(S)
PARENT/GUARDIAN #1 NAME:	PARENT/GUARDIAN #2 NAME:
ADDRESS:	ADDRESS: Same? _____
PHONE:	PHONE:
EMAIL:	EMAIL:

GRADE FOR 2026/2027 : K5 1 2 3 4 5 6 7 8 9 10 11 12

Is the applicant a previous SFK scholarship recipient? ___Yes ___No
What was the applicant's first year receiving a scholarship? _____
TOTAL number of years receiving a scholarship, including the 26/27 academic year . _____ (Only SFK)

Did the applicant receive a scholarship from another SGO during the 2025-2026 academic year? <input type="checkbox"/> Yes <input type="checkbox"/> No
Did the applicant receive funding from the CHOOSE Act during the 2025-2026 academic year? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant APPLIED for a 2026-2027 CHOOSE Act funding? <input type="checkbox"/> Yes <input type="checkbox"/> No

Is student receiving accommodations for a learning disability: No Yes

Does the student have an IEP or 504 Plan? IEP 504 N/A

Does the student have limited English language proficiency: No Yes

Has the student ever repeated a grade: No Yes Not sure

If so, what grade(s)? K5 1 2 3 4 5 6 7 8 9 10 11 12

What school(s) did the student attend during the 25/26 academic year? Check ALL that apply. Non-Public: _____ from: _____ to _____
Has the student been on academic probation in the past year: <input type="checkbox"/> No <input type="checkbox"/> Yes
Has the student violated your school's attendance policy in the past year: <input type="checkbox"/> No <input type="checkbox"/> Yes

TUITION VERIFICATION - To be completed by school receiving the applicant.

Tuition rate <u>prior to</u> discounts/subsidies: \$ _____	Discounts and subsidies: \$ _____ \$ _____
List all mandatory fees: \$ _____ \$ _____ \$ _____ \$ _____	
Cost of standardized testing: \$ _____	Family responsibility: (\$500 minimum PER CHILD) \$ _____
Other financial assistance: \$ _____	

SFK is not required to allow any changes to the tuition verification once the application has been submitted. Please make sure all subsidies and discounts are accurate. Final award amounts are at the discretion of SFK.

SCHOOL CERTIFICATION

I certify that the information provided on this scholarship application, including, but not limited to, the tuition verification and the family size and income statement, is true, correct, accurate and complete to the best of my knowledge. I recognize that eligibility determination is exclusively the responsibility of the Scholarship Granting Organization.

I certify that the tuition, fee, family responsibility and additional scholarship/financial assistance amounts provided are true, correct, accurate and a complete acknowledgement of the participating school's current published rates and subsidies. I understand that maximum scholarship amounts and family responsibility amounts are subject to change at the discretion of the Scholarships for Kids and are dependent on funding available for the academic year.

School representative:

Date:

Has your school applied to participate in the CHOOSE Act as an Education Service Provider (ESP)? YES or NO

PARENT/GUARDIAN CERTIFICATION

I certify the information and documentation provided as part of this Scholarship Application, which may include previous school information and family size and income information is true, correct, accurate and complete. I recognize that eligibility determination is exclusively the responsibility of Scholarships for Kids. I understand that maximum scholarship amounts and minimum family responsibility amounts are subject to change and are dependent on funding available for the academic year.

Media release: I give my consent for my child's name, image, photograph, video, audio, or other form of recording of my child to be used in any and all print materials, videos, and/or any other media venues for the promotion of this school and/or for organizations that help support the mission of the school or provide scholarships for students at this school. ___ Yes ___ No

Parent/Guardian Name:

Signature:

Date:

Parents should ensure:

1. All pages of the application are completed in full.
2. Minimum parent responsibility amounts (PER STUDENT):
\$500 - K-12th grade
3. All other requested documents are included with the application:
Report Card, Verification/Written Confirmation of Assigned School