



# PS87 Afterschool Program

## SCHOLARSHIP REQUEST

### Student Information

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

### Parent/Guardian Information (required for all parents/guardians)

Parent/Guardian (1): \_\_\_\_\_ Email: \_\_\_\_\_

Home Address (if different from above): \_\_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_

Parent/Guardian (2): \_\_\_\_\_ Email: \_\_\_\_\_

Home Address (if different from above): \_\_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_

### Household Information

Number of dependents: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ School/Employer: \_\_\_\_\_

**Household Information (continued)**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ School/Employer: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ School/Employer: \_\_\_\_\_

**Financial Information**

Gross Annual Income (this past year): \$ \_\_\_\_\_

Sources of Income:

Employment     Public Assistance     Unemployment/Disability     SSI

Retirement     Other (specify): \_\_\_\_\_

I am requesting tuition reduction/scholarship support for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach required documentation of financial income to your Scholarship Request.  
**Scholarships cannot be reviewed or processed without proof of income for all household members.**

I certify that all information listed here is true and accurate to the best of my knowledge. I understand that if appropriate documentation is not received that I will be billed for the full cost of the program. I understand that there is no guarantee that my child will be given tuition reduction/scholarship support.

\_\_\_\_\_  
Signature (parent/guardian of child)

\_\_\_\_\_  
Date



## PS87 Afterschool Program

### Scholarships/Tuition Reduction

PS87 Afterschool program, sponsored by the PS87 Parents Association, operates on a break-even basis. Unlike many school-based programs we do not receive government or other outside funding. Although scholarship subsidies do not cover our costs, the PS87 Parents Association is strongly committed to offering subsidized rates to families whose children otherwise might not be able to experience our award-winning program.

Scholarships/tuition reduction is based on the following criteria:

- Available funding from private sources/donations (this varies from year to year).
- Demonstrated financial need. (See Maximum Income Eligibility Chart, below. Income eligibility figures are derived from DOE guidelines determining qualification for free/reduced price lunch. These figures are adjusted each year.)
- Completed Scholarship Request form and documentation returned in a timely manner.

### Maximum Income Eligibility

Household Members	Yearly Income	Monthly Income	Bi-Monthly Income	Bi-Weekly Income	Weekly Income
1	\$18,889	\$1,575	\$788	\$727	\$364
2	\$25,327	\$2,111	\$1,056	\$975	\$488
3	\$31,765	\$2,648	\$1,324	\$1,222	\$611
4	\$38,203	\$3,184	\$1,592	\$1,470	\$735
5	\$44,641	\$3,721	\$1,861	\$1,717	\$859
6	\$51,079	\$4,257	\$2,129	\$1,965	\$983
7	\$57,517	\$4,794	\$2,397	\$2,213	\$1,107
8	\$63,955	\$5,330	\$2,665	\$2,460	\$1,230
	<b>For each</b>	<b>additional</b>	<b>Household</b>	<b>Member</b>	
	\$6,438	\$537	\$263	\$248	\$124

### Submitting Your Scholarship Request Form

- Step 1: Read over materials and contact Business Manager, Lisa Sapichino if you have any questions (212.877.3402; email [lisas@87afterschool.org](mailto:lisas@87afterschool.org)).
- Step 2: Complete Scholarship Request form and attach copies of required documentation.
- Step 3: Bring in completed form and documentation to the Afterschool Office (Room 118) before registration.

## Scholarship Request Documentation

In order for PS87 Afterschool to be in compliance for our annual certified audit and to prepare reports for our scholarship funders, we must have acceptable documentation to support the income you report on your Scholarship Request form. This documentation must be submitted for all household members listed on the form. **Applications received without proof of income cannot be reviewed or processed.**

Please submit photocopies of all applicable documents, as indicated below, to verify total household income. **Please do not submit original documents.** To ensure confidentiality, please submit your documents in a sealed envelope.

Listed below are sources of income and acceptable documentation to verify income:

- **Employment Income (including self-employed)**  
A copy of your most recent Federal income tax return, including copies of all schedules and W-2/1099 forms submitted with the return.
- **Public Assistance**  
Most recent “Notice of Action” from the Human Resource Administration (HRA). Note: Food stamp allotment is not counted as income.
- **Unemployment Insurance, Worker’s Compensation, or Disability income**  
“Statement of Benefits” or most recent check stub indicating the amount.
- **Social Security or Supplemental Security Income (SSI)**  
“Statement of Benefits” for the current year, “Direct Deposit” notice, or current bank statement indicating direct deposit of benefits.
- **Retirement Income (annuities, pensions)**  
1099 or last two consecutive paycheck stubs, indicating gross pay, time period covered, and year-to-date gross income.