

K12 Scholarship Application

Thank you for your interest in The Keystone School. To apply for a scholarship, please:

# Complete this form.

1. Read and complete all requirements listed in the Scholarship Application Instructions document.
2. Email all requested materials as attachments to scholarshipcommittee@K12.com by July 1, 2020, at 11:59 PM (ET).

|  |  |  |
| --- | --- | --- |
| Student Legal Name (First) |  | (Last) |
| Today's Date |  | Birthdate |
| Parent/Guardian Name |  | Parent/Guardian Email Address |
| Street Address |  |  |
| City | State | Zip |
| Phone Number (Day) |  | (Cell) |
| Student Grade Level (for the coming school year) |  | GPA (from student's most recent report card) |
| Name of Current School |  | School Phone Number |
| Street Address |  |  |
| CityINCOME INFORMATION | State | Zip |
| Annual Family Income |  | Number of Family Members |

Reason for Eligibility ([Click here to see income eligibility guidelines.](https://www.fns.usda.gov/school-meals/income-eligibility-guidelines) If your income is above eligibility requirements, you may still apply if you have extenuating circumstances, which you may fill in below. Documentation of extenuating circumstances must be provided with the application.)

Choose which one applies:

0 Free/Reduced Lunch

0 Other Public Assistance (Program Name) (Program Contact Name) (Phone)

0 Extenuating Circumstances (medical bills, another child in school, etc.)

By signing this application, you agree to the following. Please initial and sign below.

 If my child is granted a scholarship, my intention is for this student to graduate from the school.

 I agree to provide verification of household income by providing the front page of the 1040 form for the past two years or W2 forms for the same two years.

Signature (electronic signature accepted)