EdChoice Scholarship Program Request Form 2024-2025

	This application is for a (select one):	Traditional EdChoice Scholarship	EdChoice Expansion Scholarship (income based)		
	Student data MUST match the Birtl	n Certificate			
STUDENT INFORMATION	NAME:(First)	(Middle)	(Last)		
	DATE OF BIRTH:LA	AST FOUR DIGITS OF SSN:	GENDER: FEMALE MALE		
	MOTHER'S MAIDEN LAST NAME:	NATIVE LANGUAGE:	ETHNICITY:		
Z E	CITY OF BIRTH:	GRADE LEVEL FOR 2023-2024:	GRADE LEVEL FOR 2024-2025:		
STUDEN	IS THE STUDENT AN INCOMING KINDERO YES NO IS THE STUDENT AN INCOMING HIGH SC	YES	NT EVER ATTENDED ANY OHIO PUBLIC SCHOOL? NO IF YES, WHERE?: (ANSWER BELOW)		
	YES NO	DISTRICT:	BUILDING:YEAR:		
PARENT/	GUARDIAN SIGNING SCHOLARSHIP CHECK	KS .			
I AM THE (CHECK ONE) □ Natural Parent □ Residential Parent □ Adoptive Parent □ Student who is at least eighteen years of age □ Legal Guardian of student applying for scholarship funds (court documents or Affidavit of Eligibility required)					
PRIMARY PARENT/GUARDIAN	NAME:(First)	(Middle)	(Last)		
	DATE OF BIRTH:	LAST FOUR DIGITS OF SS	SN:		
	PHYSICAL ADDRESS:				
PI ENT/			CODE:COUNTY:		
PARE	-				
	NAME:				
z	(First)	(Middle)	(Last)		
ARY	DATE OF BIRTH:	LAST FOUR DIGITS OF S	SN:		
SECOND PARENT/GUA		STATE: ZIP C	CODE:COUNTY:		
SE(ENT					
PAF	RELATIONSHIP TO STUDENT:				
	Information MUST be complete	ed to determine eligibility.			
NOI.	My student is currently (Check only	-			
	Attending a public school	☐ Attending a charter	c/community school		
	Attending a private school	·	ver attended an Ohio school)		
SCHOOL DRMATIO	☐ New to Ohio☐ Other:	☐Attending Pre-scho	ol		
SCHOOL INFORMATION					
Z	Name of public school district you live in:				
	Name of public school building the student would be assigned to for the 2024-2025 school year:				



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INCOME

***ATTENTION: Income verification is required for New Expansion Scholarship applicants. Income verification is not required to apply for a Traditional EdChoice Scholarship. Families may qualify for low-income status if they choose to have their income verified for the Traditional EdChoice Scholarship. To complete the Income Verification process, parents may submit online using the secure Income Verification system or complete and mail the paper form. Emailing documents is not permitted.

ADDRESS VERIFICATION

<u>Verification system</u> or complete and mail the paper form. Emailing documents is not permitted.

Proof of residency is required of all first year and renewal applicants and must be submitted to the school with the application.

Parents/Guardians must document residency by providing the school with a current (less than 90 days old) utility bill. The utility (electric, gas, water, sewer, cable/internet) bill <u>must show matching service and mailing address</u> in the name of the parent/guardian. Post office boxes (except in rural areas where residents only have a PO Box) and cell phone bills have no service address and therefore are not accepted.

Other Acceptable Documents: A monthly mortgage statement (less than 90 days old) <u>or</u> lease/rental agreement (signed by lessee and lessor) <u>and</u> a piece of current business mail (examples: pay stub, bank statement, insurance statement, car payment statement, etc) with parent/guardian's name and address.

***Additional information can be found on the scholarship webpage. ***

2024-2025 EDCHOICE PARENT AGREEMENT

I	AGREE TO THE FOLLOWING:
(Parent Name)	

- The information provided in this application is true and correct.
- I have supplied the chartered nonpublic school with a certified copy of the student's birth certificate, copies of all custody/guardianship documentation for the student, and proof of my address.
- I have submitted only one EdChoice application for this student.
- The scholarship amount shall only be applied to the tuition of the enrolling school, and I may be required to pay other fees and costs as prescribed by the policies of the school.
- I will sign all scholarship checks received by the private school for my student in a timely manner. I understand that if I fail to endorse the scholarship checks to the school, I will be responsible for paying the student's tuition.
- If I transfer my scholarship to another participating chartered nonpublic school, I will notify the school of my intent to withdraw and I will return to the original school to sign any remaining checks.
- I will apply for any and all financial aid or tuition discounts and adjustments made regularly available to the students attending the school in which the student is accepted for enrollment.
- I will abide by the Ohio Department of Education (ODE) dispute resolution process outlined in Ohio Administrative Code Section 3301-11-14.
- If I am not a low-income parent or did not complete the income verification process, I will be responsible for paying any difference between the scholarship amount and the tuition of the chartered nonpublic school.
- I must inform ODE and the chartered nonpublic school of any change in the student's residential address or custody status.
- I will not be able to renew my child's scholarship if: 1) my family moves to another public school district unless my child would be assigned to an EdChoice designated public school in the new district (applicable only to students who were initially awarded a scholarship based on an EdChoice designated building); 2) my child does not complete all required assessments; 3) my child has more than 20 unexcused absences for the school year; or 4) I fail to complete the renewal process. If my child received an EdChoice Expansion scholarship, I must maintain Ohio residency.
- I have received and understand the policy handbook of the chartered nonpublic school and will abide by its provisions.
- I understand that if my child's scholarship has been awarded in error, it will be terminated immediately, and I would then be responsible for paying the tuition if I decide to keep my child at the private school.

I designate	to submit an application on my behalf for the Scholarship Program	
(Name of Private School)		
through the Ohio Department of Education's electronic appli	ication system. By signing below, I agree to the above statements.	
Signature of Parent/Legal Guardian signing thetuition check	Date Signed	

Return to the private school with student's birth certificate and a current utility bill showing <u>matching</u> service and mailing addresses.





EdChoice/Expansion Scholarship Programs 2024-2025 Acceptance Form

To finalize the acceptance of the Ohio EdChoice Scholarship, return this completed form to your participating private school within 30 days of receipt. Failure to submit this form to your private school may result in the termination of your scholarship.

Student Full Name	
☐ First-Year Applicant	☐ Renewal Applicant
Parent/Guardian Name	
Private School Name	
Public School District	
governing the Ohio Educational Choice Scholarship scholarship, I acknowledge that I am declining/term currently receiving from the State of Ohio. I also ac scholarship from the State of Ohio at any given time school, community school, or participated in another amount will be adjusted and may be less than the account of the school of th	ninating any other scholarships that my child is knowledge that my child cannot have more than one e. If my child was previously enrolled in public er state scholarship this fiscal year, the final award amount listed on the award notification. The school ip checks for you to sign. You will have 30 days
\square I decline the EdChoice/Expansion Scholarsh	ip.
Parent/Guardian Signature	Date

PLEASE RETURN THIS FORM TO THE PRIVATE SCHOOL. FAILURE TO RETURN THIS FORM TO SCHOOL MAY RESULT IN TERMINATION OF YOUR CHILD'S SCHOLARSHIP.

This form must be maintained in the student file at the private school.

The Ohio Department of Education does not discriminate on the basis of race, religion, gender, nationality, age, disability, or ethnic background.





Scholarship Check Agreement 2024-2025

Ι,,	acknowledge and agree that all EdChoice or			
(Parent/Guardian's Name)				
EdChoice Expansion Scholarship checks receiv	ved by Open Door Christian Schools (hence forth			
referred to as "the school") for my student will be cashed by the school and applied to my				
student's tuition as long as my student remains enrolled. In the event that my student is				
officially withdrawn prior to the end of the school year, the school will notify EdChoice and the				
student's scholarship award will be prorated to the number of days the student was enrolled.				
My signature below serves as my endorsement of all scholarship checks received by the school				
for my student(s).				
Parent/Guardian Signature*	Date			

*Only the parent/guardian listed as the check signer on the scholarship request/renewal form is authorized to sign.