



SCHOLARSHIP POLICY

The Scholarship Committee meets as needed to agree on eligibility requirements, review applications and determine the amount of assistance awarded. The committee may be comprised of a combination of the following:

1. Chief Executive Officer
2. Business Manager
3. Finance Director
4. One or more current or former Trustee(s) without children in the preschool
5. Former scholarship recipient

Income Eligibility

To be eligible for financial assistance, families must provide proof of a maximum adjusted gross income (AGI) of not more than 400% of the 2021 Federal Poverty Guidelines as shown below. At the discretion of the committee, an exception may be made for a currently enrolled family facing financial hardships.

# in Household	Level of Scholarship			
	90-100%	75-90%	60-75%	Variable up to 50%
2	Less than \$34,480	\$34,481- \$43,100	\$43,101- \$51,720	\$51,721 - \$68,960
3	Less than \$43,440	\$43,441- \$53,340	\$53,341- \$65,160	\$65,160 - \$86,880
4	Less than \$52,400	\$52,401- \$65,500	\$65,501- \$78,600	\$78,601 - \$104,800
5	Less than \$61,360	\$61,361- \$76,700	\$76,701- \$92,040	\$92,401 - \$122,720
6	Less than \$70,320	\$70,321- \$87,900	\$87,901- \$105,480	\$105,480 - \$140,640
7	Less than \$79,280	\$79,281- \$99,100	\$99,101- \$118,920	\$118,921 - \$158,560
8	Less than \$88,240	\$88,241- \$110,300	\$110,301- \$132,360	\$132,361 - \$176,480
<i>Add \$6,720 for each person over 8</i>				

Award Amount

Once eligibility is established, the Scholarship Committee will determine the size of the award based on needs and available funds.

Financial aid may be applied to tuition and registration fee. Application and all required documents must be submitted no later than March 22nd.

Revised March 2021



SCHOLARSHIP APPLICATION

As a nonprofit agency, Forty Carrots Family Center depends on both participant fees and fundraising to maintain services. We are committed to serving families in all income brackets; participants are expected to pay a fee based on their financial ability. The amount of scholarship depends on available scholarship funds raised through fundraising efforts.

APPLICANT _____ CHILD'S NAME _____

EMAIL _____ CELL PHONE _____

ADDRESS _____ CITY _____ ZIP _____

HAVE YOU PARTICIPATED IN ANY FORTY CARROTS PROGRAMS? YES NO IF YES, SPECIFY _____

HOUSEHOLD (INCLUDE ALL CHILDREN & ADULTS)	RELATIONSHIP	BIRTH DATE	AGE

REQUEST FOR PRESCHOOL TUITION HOURS: CHOOSE ONE

REQUEST FOR REGISTRATION FEE (\$350)

- 8:00 am – 1:00 pm
- 8:00 am – 2:30 pm
- 8:00 am – 4:00 pm
- 9:00 am – 1:00 pm
- 9:00 am – 2:30 pm
- 9:00 am – 4:00 pm

INCOME INFORMATION

APPLICANT'S EMPLOYER _____ PHONE _____

FULL-TIME PART-TIME HOURS PER WEEK _____ GROSS MONTHLY EARNINGS \$ _____

SPOUSE'S EMPLOYER _____ PHONE _____

FULL-TIME PART-TIME HOURS PER WEEK _____ GROSS MONTHLY EARNINGS \$ _____

***PLEASE ATTACH AN ESSAY DESCRIBING YOUR FAMILY'S SITUATION AND WHY YOU CHOSE FORTY CARROTS AND THE DAILY PRESCHOOL HOURS NEEDED ***

I UNDERSTAND THIS FINANCIAL ASSISTANCE IS FOR THE CURRENT SCHOOL YEAR ONLY. I AM ENCLOSING A COPY OF MY MOST RECENT INCOME TAX RETURN AND A COPY OF MY LATEST W-2 EARNINGS STATEMENT (REQUIRED TO PROCESS APPLICATION).

APPLICANT'S SIGNATURE _____ DATE _____