

Support for Talented Students – Scholarship Application Form

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Please complete this form and scan it, take pictures of the pages or mail it to the STS Scholarship Committee per the instructions on the “STS Scholarship Application Information” reference document/site.

Student Information

Student First Name _____

Student Last Name _____

Student Date of Birth _____

Student Current Grade Level (check the one that applies to this student)

___ 3rd

___ 4th

___ 5th

___ 6th

___ 7th

___ 8th

___ 9th

___ 10th

___ 11th

Student School District Type (check one)

___ Columbus City Schools

___ Other Ohio Public School District

___ Charter School

___ Private or Parochial School

Student's School Name _____

Parent or Guardian First Name _____

Parent or Guardian Last Name _____

Parent or Guardian's Contact Phone - Home (If available) _____

Parent or Guardian Email Address

Provide the email address at which to reach the parent/guardian. This should not be the student's email address. _____

Parent/Guardian Address: House # / Street / Apt # (add apartment number, if applicable).

Parent/Guardian City _____

Parent/Guardian State _____

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Parent/Guardian Zip Code _____

Student lives where?

With the parent or guardian at the address listed above?

At another address? If the student does not live with the parent or guardian who is completing this form, enter the student's address here.

Student's House# / Street / Apt# _____

Student's City _____

Student's State _____

Student's Zip Code _____

Prior STS scholarship?

Have you ever received an STS scholarship in the past for this student?

Yes

No

Eligibility

ID Qualifier

Is your student identified as gifted or talented in one or more areas by an Ohio school?

Yes

No

Grade Qualifier

Is your student currently in grades 3-11?

Yes

No

Income Qualifier

Please select the option below that applies to your household.

Receive financial assistance from federal, state, or county.

Have a family income at or less than the eligibility guidelines in the table below.

Have an "extra-ordinary" circumstance that prevents the family from fully or partially paying for the enrichment program. See "Other Family Information" to describe these circumstances.

None of the above.

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Income Eligibility Guidelines

Based on family size confirm that your income is AT OR BELOW the number shown for how frequently you receive income/assistance.

INCOME ELIGIBILITY GUIDELINES 2016						
Household Size	Federal Poverty - 100%		SNAP - 130%		Reduced Price Meals - 185%	
	Annually	Monthly	Annually	Monthly	Annually	Monthly
1	\$11,880	\$990	\$15,444	\$1,287	\$21,978	\$1,832
2	\$16,020	\$1,335	\$20,826	\$1,736	\$29,637	\$2,470
3	\$20,160	\$1,680	\$26,208	\$2,184	\$37,296	\$3,108
4	\$24,300	\$2,025	\$31,590	\$2,633	\$44,955	\$3,746
5	\$28,440	\$2,370	\$36,972	\$3,081	\$52,614	\$4,385
6	\$32,580	\$2,715	\$42,354	\$3,530	\$60,273	\$5,023
7	\$36,730	\$3,061	\$47,749	\$3,979	\$67,951	\$5,663
8	\$40,890	\$3,408	\$53,157	\$4,430	\$75,647	\$6,304
Each Addtl Family Member	\$4,160	\$347	\$5,408	\$451	\$7,696	\$641

Exclusions

If you answered “No” to the **ID Qualifier** or the **Grade Qualifier** or if you answered “None of the above” to the **Income Qualifier** questions above, unfortunately, your student does not qualify for an STS Scholarship. You may apply directly to the program, however, because a number of them have other scholarship options available.

Enrichment Program Information

Program Name (ex. OWJL Camp, COSI, etc.).

Program Website _____

Specific Session/Class Name (if available) Name of specific Program Session or Class the student would like to attend (if available).

Session/Class Start Date The funded Program is usually one week per student. _____

Session/Class End Date The funded Program is usually one week per student. _____

Program Cost? Copy from the Program's website. Be sure to include the total program (tuition plus food and lodging) cost of the program for the period you are requesting.

\$ _____

Amount You Are Requesting from the STS? If you are able to cover some of the cost, this allows more STS dollars to be available to help other students.

\$ _____

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Student Statement

The Student Statement is to be written by the student: In a paragraph, tell us what you hope to learn in this program that is new and different for you. (We already know you will do fun things and make new friends, so please share other things you hope to gain from the program.)

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Is the Program on the STS "Summer Programs" list?

___ Yes. Then skip Program Main Goals and Activities. Go to Confidential Statement of Income section.

___ No. YOU MAY, OF COURSE, APPLY FOR A SCHOLARSHIP TO A PROGRAM NOT ON THIS LIST. Be aware, though, that STS will have to investigate the program to determine if it meets our criteria as an academically- or artistically- focused activity. If it fails to do so, the scholarship application will be rejected. Complete the next 2 items: Program Main Goals and Main Activities.

Main Goals of the Selected Program: To be completed ONLY IF the Program is NOT included on the STS "Summer Programs" list. This information may be copied and pasted from the Program's website. Continue to Main Activities below.

Main Activities of the Selected Program: The main activities of the selected Program must be completed ONLY IF the Program is NOT included on the list provided on the "Summer Programs" list. This may be copied and pasted from the Program's website.

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Confidential Statement of Income

Please complete this information regarding your eligibility for an STS scholarship for your student. This information will not be shared with the summer program or any other entity/person. This information is related to the parent/guardian who claims the child as a dependent.

Parent/Guardian Income Tax Return?

Yes

No

Family's Income

Enter the family's "adjusted gross income" from your 2015 or 2014 Form 1040, line 37. Student should be listed as a dependent. \$ _____

Tax Return Year for above Family Income amount. (If you have not filed your 2016 taxes by the time this application is submitted, use the adjusted gross income amount shown on your 2015 Federal tax return.)

2016 (preferred)

2015

Other Income?

Do you receive any other income? (ex. alimony, child support, ADA, Social Security) Please identify sources, frequency of incomes and amounts.

Other Family Information

Number of household dependents: Including yourself, how many people living in your household depend on you for more than half of their support? _____

Unusual or special financial circumstances

Please state any unusual or special financial circumstances that you believe STS should know about when evaluating this application. (If there are none, leave this section blank.)

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Income or Assistance Verification

Please provide a copy of the first page of your federal income tax return, letter of Federal/state/county program or assistance, or other proof of the financial assistance listed above.

You may scan and email it to stsinfo@supportfortalentedstudents.org **OR**

mail a copy to:

Support for Talented Students Inc
Scholarship Committee
2200 Lane Woods Drive
Columbus, OH 43221

Your student's application cannot be processed without this proof of income. Please provide it to STS by March 3, 2017.

Method for Providing Income Verification

Select the method you are using to provide the first page of your Federal income tax return, letter of Federal/state/county program or assistance, or other proof of the financial information required above. Remember, your student's application cannot be processed without this proof of income.

_____ Scan and email form to stsinfo@supportfortalentedstudents.org **OR**

_____ Mail copy through US postal service to STS Scholarship Committee at the address above

Student's School Sponsor's Recommendation

A sponsor is a counselor, gifted teacher, gifted coordinator, or another educator with knowledge of your child's gifted identification. Each application must include the name of a School Sponsor for this student.

Students outside the Columbus City Schools must have the sponsor complete a recommendation form and verify the student's gifted identification. Sponsors can complete that form on the attached form or through the STS website. To use the website, ask your Sponsor to complete the form found at the link below:

https://docs.google.com/forms/d/1_IKQ4da5YTWQXNd0OnSvRZ2s4iQ2r6tyxvZEXUwpKEo/viewform?usp=send_form

They can also access this form via a link on the STS website at www.supportfortalentedstudents.org.

Sponsor's Name _____

Sponsor's email address _____

Signature to Accept Terms and Conditions

"I have read the Parent/Guardian and Student Application instructions, terms and conditions. I accept the terms and conditions stated in the document. Also, I agree to provide proof of the financial information I have given on this application. This may include proof of:

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1. family adjusted gross income as shown on my federal income tax form 1040 for the 2016 tax filing year or the prior tax year OR
2. a letter of eligibility for Federal/state/county assistance programs.

I verify that all information provided on this application is complete and correct to the best of my knowledge. I understand that all financial information will be held in confidence, including the amount of the award."

I understand that I must submit a separate application to and be accepted by the Program before STS will consider this application to be complete for consideration.

Full Name: _____

Date of Signature _____

Permission for Use of Pictures and Information for Publicity (Optional)

YOUR CONSENT IS NOT REQUIRED FOR YOUR CHILD TO RECEIVE FUNDING.

"I give my consent for STS to use photographs of my child taken during the program, as well as information regarding my child's participation in STS-funded experiences, for use in advertising and publicity for STS."

Full Name: _____

Date of Signature _____

Next Steps

Please be sure to complete all of the following steps in order for your student's application to be complete.

1. Complete this application process for the student and send it to STS,
2. Send your Income Verification form as soon as possible to the address on the main application screen and on the reference instructions.
3. Apply directly to the Program or on its website to confirm a space. AND
4. if your student is not a Columbus City School student, contact the sponsor to complete the recommendation process and return it by March 3, 2017.

CONGRATULATIONS!

If you have done all these steps, you have completed the application process. STS will notify you as soon as your application is received and if it has any questions during the review process. Scholarships will be awarded by April 1, 2017.