

ACE MONTANA SCHOLARSHIP APPLICATION

Private scholarship program for students grades K-12

INSTRUCTIONS:

- (1) One application per student
- (2) Please print your responses below, sign and return this application to your private school along with your 2019 IRS 1040 A or EZ forms (1st and 2nd pages only) and any other additional forms that may be needed.
- (3) Complete Parent Expectation Survey (will be emailed to you after review of application)

INCOME ELIGIBILITY:

- (1) Families must qualify for the Federal Free and Reduced Lunch program as follows:

Household Size	Annual Income
1	\$23,606
2	\$31,894
3	\$40,182
4	\$48,470
5	\$56,758
6	\$65,046
7	\$73,334
8	\$81,622

Each additional family member above 8, add \$8,288.

FAMILY INFORMATION

Please choose the option below that best describes your family situation.

I am currently -

- Raising my child with spouse/partner – If this box is marked please complete Primary Household Information ONLY
- A single parent raising my child by myself – If this box is marked please complete Primary Household Information ONLY
- Divorced and I share custody with the other parent – If this box is marked please complete Primary AND Secondary Household Information
- Other – Please Specify _____
If this box is marked please complete Primary Household Information ONLY

PRIMARY HOUSEHOLD

First Name of Parent / Guardian 1:

Last Name of Parent / Guardian 1:

Relationship of Primary Parent/Guardian 1 (Circle One)

Father / Mother / Grandparent / Aunt, Uncle / Guardian / Other

Highest education level of Parent/Guardian 1 (Circle One)

Some High School / High School Graduate / Certificate Program / Some College / Associate's Degree / Bachelor's Degree / Graduate Degree

PRIMARY HOUSEHOLD CONTINUED

First Name of Parent / Guardian 1 Spouse:	Last Name of Parent / Guardian 1 Spouse:
Relationship of Primary Parent/Guardian 1 Spouse: (Circle One) Father / Mother / Step-Father / Step-Mother / Grandparent / Aunt, Uncle / Guardian / Other	
Highest education level of Parent/Guardian 1 Spouse: (Circle One) Some High School / High School Graduate / Certificate Program / Some College / Associate's Degree / Bachelor's Degree / Graduate Degree	
Preferred Language of Parent(s) / Guardian(s) 1: (Circle One) English / Spanish / German / French / Other	
Parent / Guardian 1 Mailing Address:	City, State, Zip
Primary Phone Number:	Type: (Circle One) Home / Work / Cell / Other
Secondary Phone Number:	Type: (Circle One) Home / Work / Cell / Other
Spouse Primary Phone Number:	Type: (Circle One) Home / Work / Cell / Other
E-Mail (REQUIRED):	Spouse E-Mail:

SECONDARY HOUSEHOLD (if applicable)

First Name of Parent / Guardian 2:	Last Name of Parent / Guardian 2:
Relationship of Primary Parent/Guardian 2 (Circle One) Father / Mother / Grandparent / Aunt, Uncle / Guardian/Other	
Highest education level of Parent/Guardian 2 (Circle One) Some High School / High School Graduate / Certificate Program / Some College / Associate's Degree / Bachelor's Degree / Graduate Degree	
First Name of Parent / Guardian 2 Spouse:	Last Name of Parent / Guardian 2 Spouse:
Relationship of Primary Parent/Guardian 2 Spouse: (Circle One) Father / Mother / Step-Father / Step-Mother / Grandparent / Aunt / Uncle / Guardian / Other	
Highest education level of Parent/Guardian 2 Spouse: (Circle One) Some High School / High School Graduate / Certificate Program / Some College / Associate's Degree / Bachelor's Degree / Graduate Degree	
E-Mail:	
Primary Phone Number:	Type: (Circle One) Home / Work / Cell / Other
Spouse Primary Phone Number:	Type: (Circle One) Home / Work / Cell / Other

STUDENT INFORMATION

First Name:	Middle Name:	Last Name:
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Birthdate:	Gender (Circle One): Male / Female	Ethnicity: (Circle One)* African American / Asian / Caucasian / Hispanic / Multiracial / Other (specify): <i>* For data purposes only. ACE does not award scholarships on the basis of ethnicity.</i>
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School where student attended during 2019-2020 School Year:	Type of school attended: ___ Public ___ Private ___ Charter ___ Homeschool
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Students Cell Phone:	Students E-Mail:
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Name of public school district student would be assigned to:

Private School Student is Applying to:	Student Grade Fall 2020:
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Tuition for Student (to be completed by school) –
This is the cost the school will charge for the individual student in tuition (do not include fees, books, etc.) \$

INCOME INFORMATION:

Total Number people living in household reflected on Tax Return:
Number of Adults: _____ **Number of Children/Dependents:** _____
(if the number in household is different than what is on the tax return, please explain in the family history.)

2019 Annual Household Income (from 2019 IRS 1040 A or EZ Forms) : \$ _____
If you own a business please also provide the following forms from the 2019 tax return: 1120s (s corp), form 1065 (partnerships), schedule c (sole proprietor)

Additional Source of Income – If NOT reported on the 1040 Form
Please enter Annual Amount or “0” if receiving none – if you do receive one of these sources of income, please provide an award letter or notarized letter confirming the amount

Social Security: \$ _____ Yearly
Child Support: \$ _____ Yearly
Disability: \$ _____ Yearly
Housing Allowance: \$ _____ Yearly
Food Stamps: \$ _____ Yearly
Other: \$ _____ Yearly

ADDITIONAL INFORMATION

Do you currently have, or have you in the past had, a student receiving ACE funding? If so, please list student(s) name(s).

Please provide a brief family history (including family size and make-up, country of origin, circumstance for requesting financial aid, etc. Provide additional page if you like).

PARENT & STUDENT RESPONSIBILITIES:

If awarded a scholarship, the following are the parent responsibilities and student expectations:

Parent Responsibilities:

- Provide accurate information on the application and complete all requested paperwork by established deadlines
- Each year, submit financial statements (first and second pages of tax returns) to ensure financial qualifications by established deadlines
- Attend ACE family events throughout the year
- Each year, write a thank you letter to an ACE donor (donor name and instructions to be provided by ACE)
- Agree to have children meet with ACE staff once or twice a year. Meeting to be held at student's school with the approval of school administration and representative from school present
- If student leaves the ACE program, complete an exit interview for ACE data tracking purposes
- Participate in ACE surveys periodically (at most once per year) to help ACE collect data and assess the effectiveness of our scholarship program

Student Expectations:

- Remain in good academic and behavioral standing with your school
- Attend ACE family events throughout the year
- Each year, write a thank you note to an ACE donor (donor name and instructions to be provided by ACE)
- Participate in ACE surveys periodically (at most once per year) to help ACE collect data and assess the effectiveness of our scholarship program
- Meet with ACE staff once or twice a year. Meeting to be held at student's school with the approval of school administration and representative from school present.
- Upon graduation from high school, communicate with ACE staff on an annual basis to provide ACE with information on college and work place

Please Check box if you agree to the following policy (optional):

I agree to give ACE Scholarships permission to use the quotations, video and audio footage, and/or photographs that I (or my child) either provide directly to ACE or allow ACE staff or their contractors to capture at ACE sanctioned events, photos sessions or other meetings and gatherings. I understand that these photographs and quotations could be used in publications, print advertisements, direct-mail pieces, electronic media (like video, CD, internet), or other promotion materials. I release ACE and its designees from liability for any violation of any personal or proprietary rights I may have in connection with using these quotations or photos.

Please Check box if you agree to the following policy (optional):

I agree to receive periodic phone calls, text messages, emails, or other written or electronic communications from ACE Scholarships about ACE programming, events, public policy issues or initiatives, or other topics of interest to ACE or my school.

Parent/Guardian Permission:

By signing this application, I hereby authorize the release of any academic information or records (including, but not limited to, midterm reports, final grades, class schedules, transcripts, test scores and financial information) from all schools included in the Student Information section on the prior page to ACE Scholarships. I understand that such information will not be made public unless either (1) I consent to the public disclosure of such information or (2) such information is not individually identified as being related to the student.

SIGNATURE OF PARENT OR GUARDIAN

DATE

Disclaimer: Applicants are NOT guaranteed a scholarship by completing this form. Scholarships are awarded on an annual basis by ACE in its sole and absolute discretion. If a student is awarded a scholarship, ACE will pay up to 50% of the tuition to a private school (limited to \$2,000 annually for grades K (5)-8 or \$3,000 annually for grades 9-12) for the school year in which the scholarship was awarded. Any funding for future school years will be determined by ACE at its sole and absolute discretion.