Newburyport Public Schools 70 Low Street, Newburyport, MA Attn: Scholarship Program

School Year 2023-23 iPad Program Scholarship Application

Please submit only one application for all children in a family. You must reapply every year, new documentation will be required.

| Student(s) Name: | |
|-------------------------------|--|
| Home Address: | |
| Parent/Guardian Cell phone: _ | |
| Parent/Guardian email: | |

| Parent/Guardian(s) Names | Monthly Gross Wages | Monthly Other Income | Total Monthly Income |
|--------------------------|------------------------|-------------------------|-------------------------|
| | | | |
| | | | |
| | | | |

| Sibling Names | Grade | School |
|---------------|-------|--------|
| | | |
| | | |
| | | |
| | | |

Income Verification–Please include copies of the following income documents:

- □ 2021 1040 Federal Tax Return (no WZ's)--if self employed include Schedule C (required)
- □ Last three pay stubs (required)
- □ Please also include any of the following (if they are applicable to your family):
 - **TANF** Documentation
 - □ Proof of Unemployment
 - DCF Custody Form
 - Proof of Alimony/Child Support Payments
 - □ Proof of Disability/Social Security Payments

Household Size Verification–Please include one of the following:

- 2021 1040 Federal Tax Return
- □ SNAP or Housing Calculation Page
- □ Housing Lease listing all members living in the home

| Types of Income that will be considered | | | |
|--|--|--|--|
| -Earned income (wages) -Business/rental Income -Social Security Payments | -Disability Payments -IRA/Pension/Annuity Distributions -Unemployment Compensation | -Child support -Alimony -Other Income as defined on 1040 Tax Form | |

I certify that all of the information I am providing is true and correct and that all income is reported. I understand that this information is for the sole purpose of determining eligibility for a scholarship and is confidential; and that deliberate misrepresentation will disqualify me from consideration of such scholarship.

| Parent/Guardian Signature: | Da | ate: | |
|----------------------------|----|------|--|
|----------------------------|----|------|--|

If you have any questions regarding this Scholarship Application, please contact our Business Office at (978)465-4456 or by email <u>scholarships@newburyport.k12.ma.us</u>.

Please submit this form and all documentation to

<u>scholarships@newburyport.k12.ma.us</u> OR mail/hand deliver to Newburyport Public Schools, 70 Low Street, Newburyport, MA 01950 attn: Scholarships.

Incomplete applications cannot be processed. Please make sure you complete every section.

Forms are due March 31, 2023

NOTICE OF NONDISCRIMINATION

All educational and non-academic programs, activities and employment opportunities at Newburyport Public Schools are offered without regard to race, color, sex, religion, national origin, ethnicity, sexual orientation, gender identity, homelessness, age, and/or disability, and any other class or characteristic protected by law.