

# DISCOVERY SCHOOL SCHOLARSHIP PROGRAM

Discovery School is proud to offer a need-based scholarship program to families seeking tuition assistance. The Scholarship Committee strives to maintain complete anonymity of applicants, and a set of objective criteria is applied to the consideration of each application.

For the 2024-2025 school year, applications will be accepted through May 1, 2024. Scholarship decisions will be made, and families notified of their status, no later than thirty (30) days after receipt of the application. This will ensure that families can make an informed financial decision well before the start of school in the fall and before annual supply fees are due in July.

Competed Scholarship application packets may be submitted to the Office or electronically via email to [discoveryschooltreasurer@gmail.com](mailto:discoveryschooltreasurer@gmail.com)

Scholarships are only granted to families who demonstrate a financial need for tuition assistance through the completion of our application, which must be submitted along with supporting documents, on or before the deadline. **Late and/or incomplete applications will not be considered.** Additionally, each recipient must agree to: (1) keeping their school account in good standing and (2) a reciprocal arrangement in which the recipient volunteers 1 hour per month for each \$50 per month in scholarship received. These volunteer hours are in addition to the types of activities in which all parents volunteer, such as class pizza lunches or School events. Qualifying volunteer activities will be made available to scholarship recipients through Parent Square. Failure to comply with either of the above-mentioned conditions will result in loss of that month's tuition assistance.

The eligibility guidelines for scholarship are tied to the poverty guidelines published each year by the US Department of Health and Human Services. The table below shows the guidelines for 2024. Based on the scholarship funds available and the number of applicants, a percentage cutoff for eligibility is determined by the Scholarship Committee

<b>Persons in family/household</b>	<b>Poverty guideline</b>
For families/households with more than 8 persons, add \$5,380 for each additional person.	
1	\$15,060
2	\$20,440
3	\$25,820
4	\$31,200
5	\$36,580
6	\$41,960
7	\$47,340
8	\$52,720

For example, if you are a family of 4 with an annual gross income of less than \$83,250 there is a strong chance you would qualify for some amount of tuition assistance. Gross income includes base pay, recurring annual bonuses, military housing (BAH)/subsistence (BAS)/other military allowances, recurring interest/dividend income, child support payments, and any other income. Although annual gross income is the primary way applicants are evaluated, any of our families who are experiencing special or short-term circumstances are encouraged to apply.

In addition to the applicants' income, the committee will take into account expenses described on the application, and any other information the applicant feels would help provide a clearer picture of his/her household's financial situation. Scholarship funds will be applied to tuition only and will not include Stay and Play fees, Late Care fees, Registration fees, Supply fees, or Activity fees. Tuition assistance is not intended to subsidize cultural arts classes. In cases where child care is necessary beyond regular school hours, we ask that you make Stay and Play your primary option.

In an effort to cover more of the higher tuition rates in the older classes, for the 2024-2025 year, an additional award of 10% of the tuition rate will be granted to all Kindergarten and First Grade recipients (if your family qualifies for a 20% scholarship - the award would be 30% for a Kindergarten or First Grade recipient). Please direct your scholarship questions to Cynthia Rodriguez, the school Office Manager, and they will be promptly addressed. The decision to grant scholarship funds rests solely with the Scholarship Committee. Appeals will only be heard by the Scholarship Committee and must be addressed in writing directly to them through the Office Manager.

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# DISCOVERY SCHOOL OF SAN ANTONIO, INC. SCHOLARSHIP APPLICATION

*(All applications must be received by May 1, 2024)*

This application must be completed in its entirety. Use "N/A" in blanks which do not apply to you or your household. The following MUST be included with your application:

1. Most recent pay stub(s). Please note the frequency of paychecks (weekly, biweekly, etc.).
2. A copy of your most recent tax return. If you own your own business, include an Income Statement (or Schedule C) and a balance sheet for each business.

**Incomplete applications WILL NOT be considered. Due to the limited time frame in which applications are evaluated, we will not contact you to furnish missing information. Your application simply will not be considered.**

Date: \_\_\_\_\_

Applicant's name(s) \_\_\_\_\_  
(Parents or legal guardians)

Address: \_\_\_\_\_

Best contact number: \_\_\_\_\_

Email address: \_\_\_\_\_

Please list the names and ages of children who will attend Discovery School and the type of class (2 Day, 3 Day, 5 Day, Kinder, or First) for which each child is registered.

NAME:	AGE:	CLASS:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Acceptance of scholarship funds implies: (1) the applicant's school account remains in good standing and (2) a reciprocal agreement in which the recipient commits to volunteer 1 hour for every \$50 received in scholarship. This volunteer commitment is an addition to the activities for which all Discovery School parents are asked to volunteer, such as class pizza lunches and classroom holiday celebrations. Volunteer hours are evaluated monthly by the Scholarship Committee. Failure to complete volunteer hours will result in revocation of that month's tuition assistance.

Please sign below if you accept this reciprocal agreement and wish to be considered for tuition assistance:

\_\_\_\_\_  
Signature (Applicant 1)

\_\_\_\_\_  
Signature (Applicant 2)

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Printed name

Please enter the number of children who will be enrolled in each type of class:

2 Day \_\_\_\_\_ 3 Day \_\_\_\_\_ 5 Day \_\_\_\_\_ Kinder \_\_\_\_\_ First \_\_\_\_\_

Total tuition: \$ \_\_\_\_\_

**Household information** (do not include individuals who have another primary residence):

Number of adults (over age 21) living in the household: \_\_\_\_\_

Number of children (under age 21) living in the household: \_\_\_\_\_

**Parent/Guardian information** (needs to be completed only for each parent who lives in the household):

Parent/Guardian 1 occupation: \_\_\_\_\_

Parent/Guardian 1 employer: \_\_\_\_\_

Parent/Guardian 2 occupation: \_\_\_\_\_

Parent/Guardian 2 employer: \_\_\_\_\_

Number of Parents/Guardians (living in the household) who are not employed \_\_\_\_\_

If any Parent/Guardian (living in the household) is not employed, please state reason: \_\_\_\_\_

Reason for your scholarship request Please include any information that will give the Scholarship Committee an accurate understanding of your financial circumstances (i.e. change in income/work status, unforeseen expenses, illness or hospitalization, (attach another sheet if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Amount of scholarship requested: \$ \_\_\_\_\_ per month**

**Length of time that tuition assistance will be needed (all year/specific months): \_\_\_\_\_**

\_\_\_\_\_

**Income Information:**

Household gross **annual** income:  
(Combine figures if there are two or more incomes in any area.)

Base salary pay: \$ \_\_\_\_\_

Military allowances\* \$ \_\_\_\_\_

\* Examples: BAS, BAH, VSP PHYS,  
Fly Pay, HDIP, Proficiency Pay

Child support received: \$ \_\_\_\_\_

Business income: \$ \_\_\_\_\_

Dividend/Interest income: \$ \_\_\_\_\_

Capital gains income: \$ \_\_\_\_\_

Real estate income: \$ \_\_\_\_\_

Trust/Inheritance income: \$ \_\_\_\_\_

Gifts: \$ \_\_\_\_\_

All other income: \$ \_\_\_\_\_

**Total GROSS ANNUAL  
household income** \$ \_\_\_\_\_

**Total ADJUSTED GROSS INCOME  
as reflected on your tax return** \$ \_\_\_\_\_

(If your total gross annual household income differs from your adjusted gross income reported on your 1040 by more than 10%, please include an explanation.)

**Please use this space to give any additional information regarding your household income that would assist the committee in evaluating your application:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Expense Information:**

Household **average monthly** expenses:

Rent/Mortgage: \$ \_\_\_\_\_

Electricity/Gas: \$ \_\_\_\_\_

Water: \$ \_\_\_\_\_

All other utilities/home phone: \$ \_\_\_\_\_

Cell phone(s): \$ \_\_\_\_\_

Vehicle 1: Year \_\_\_\_\_ loan/lease: \$ \_\_\_\_\_

Vehicle 2: Year \_\_\_\_\_ loan/lease: \$ \_\_\_\_\_

Auto insurance: \$ \_\_\_\_\_

Child support paid: \$ \_\_\_\_\_

Loans for recreational vehicles\*: \$ \_\_\_\_\_

Real estate\*: \$ \_\_\_\_\_

(Other than primary residence)

Medical expenses\*: \$ \_\_\_\_\_

Other loan expenses\*: \$ \_\_\_\_\_

Private School Tuition\*\*: \$ \_\_\_\_\_

(Other than Discovery School)

Other childcare expenses\* \$ \_\_\_\_\_

Other expenses\*: ` \$ \_\_\_\_\_

**Total AVERAGE MONTHLY household expenses: \$ \_\_\_\_\_**

