



**SCHOLARSHIP PROGRAM - 2021**

## Scholarship Application: **Program Purpose Guidelines & Priorities**

- Seeking to assist families in financial need with a record of volunteerism in school fundraisers and participation in extracurricular school activities.
- Scholarship funds (if awarded) will be applied against applicant's tuition and fees for the 2021-2022 school year.
- Application deadline is **April 30, 2021 by 2:00 p.m.** to be received at the school's administrative office. Late applications are not accepted.

Mail or drop off one copy of a completed application package, including essay, 2 personal letters of recommendation (*If awarded a scholarship in 2020-2021 school year, no letters of recommendation are required*), 2020 Tax returns to:

**Special Needs Schools of Gwinnett  
660 Davis Road, Lawrenceville, GA 30046**

The applications will be reviewed and recipients selected by a committee consisting of volunteers of SNS of Gwinnett. The SNS volunteers on this committee do not have a family member who attends the school. The recipients of the scholarships will be notified by May 31, 2021 for scholarships awarded in August 2021.

Applications may be downloaded from the SNS of Gwinnett website at  
**[www.specialneedsschools.org/4parents.html](http://www.specialneedsschools.org/4parents.html)**

Please submit any questions to  
**[smyers@specialneedsschools.org](mailto:smyers@specialneedsschools.org)**

# Scholarship Application: **PARENT/GUARDIAN INFORMATION**

Enter names exactly as they appear on tax/official forms.

## **PARENT/GUARDIAN A** (Parent/Guardian A will be our primary contact for correspondence.)

Full Name (Last, Middle First) Suffix

Address

City State/Province Zip/Postal Code Country

Date of Birth (mm/dd/yyyy) Gender: Male  / Female

Email Primary Phone #, please check one: Home  Work  Cell

Employer Name Years with Employer Occupation

If Parent/Guardian A has more than one job, explain

## **PARENT/GUARDIAN B**

Full Name (Last, Middle First) Suffix

Address

City State/Province Zip/Postal Code Country

Date of Birth (mm/dd/yyyy) Gender: Male  / Female

Email Primary Phone #, please check one: Home  Work  Cell

Employer Name Years with Employer Occupation

If Parent/Guardian B has more than one job, explain

## **OTHER PARENT** (If the applicant(s) has another living biological or legal (adoptive) parent not listed above, complete this section.)

Full Name (Last, Middle First) Suffix

Address

City State/Province Zip/Postal Code Country

Indicate the relationship between the parents: Never married  Divorced  Separated  no court action  Separated

Legally Year of divorce/separation (yyyy): \_\_\_\_\_

Is there a joint custody agreement: Yes  No

Does the joint custody agreement address who is responsible for the payment of educational expense for the child? Yes  No

If Yes, please elaborate:

\_\_\_\_\_

# Scholarship Application: **APPLICANT/STUDENT INFORMATION**

## **APPLICANT INFORMATION**

Enter names exactly as they appear on tax/official forms.

Full Name (Last, Middle First)

Last 4 Digits of Social Security Number

Current Grade

Current School

Grade applicant will enter in fall 2021

Applicant lives with

Parent/Guardian A & B

Parent/Guardian A

Parent/Guardian B

Other  (identify)

## **DEPENDENT INFORMATION**

Enter names exactly as they appear on tax/official forms.

Complete this section for all dependent individuals in your household who are NOT applying for the 2021 SNS Scholarship Program . A dependent is identified as an individual—child or adult— for whom you provide at least 50% of their financial support each year. Include children for whom you provide support, even if they do not live with you. If you have dependents who are not children, include them here. DO NOT add anyone to this section you have already identified as a Parent/Guardian or an Applicant.

### **DEPENDENT 1**

Full Name (Last, Middle First)

Date of Birth (mm/dd/yyyy)

Current Grade

Current School

Gender: Male  / Female

### **DEPENDENT 2**

Full Name (Last, Middle First)

Date of Birth (mm/dd/yyyy)

Current Grade

Current School

Gender: Male  / Female

### **DEPENDENT 3**

Full Name (Last, Middle First)

Date of Birth (mm/dd/yyyy)

Current Grade

Current School

Gender: Male  / Female

### **DEPENDENT 4**

Full Name (Last, Middle First)

Date of Birth (mm/dd/yyyy)

Current Grade

Current School

Gender: Male  / Female



## Scholarship Application: **ESSAY**

On a *separate sheet* please write an essay (250 - 500 words) answering the questions below:

**Why should the applicant be selected to receive a scholarship?**

Also, share in your essay any challenges or obstacles you or your family have dealt with and overcome in life and how this will help you succeed at Special Needs Schools of Gwinnett and beyond.

## Scholarship Application: **OTHER INFORMATION**

Please provide any other information you believe is pertinent to your family's situation.

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# Scholarship Application: **FAMILY INCOME**

## **BASIC TAX INFO**

Have you completed your 2020 Tax Return? Yes  No  (use estimated)

Income tax filing status for 2020:

1. Single
2. Married, Filing Jointly
3. Married, Filing Separately
4. Head of Household
5. Did Not File
6. Qualifying Widow(er) with Dependent Child

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How many federal income tax exemptions did you or will you claim for 2020?

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If you filed or will file IRS Schedule A, what did you or will you report as your total itemized deductions?

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What did you or will you pay in total federal taxes in 2020? Refer to IRS Form 1040 (line 63 minus line 57), Form 1040A (line 39) or Form 1040EZ (line 10)

## **TOTAL TAXABLE INCOME**

### **SALARIES AND WAGES**

Total salaries and wages can be found in Box 1 of the W2 form given to you by your employer. If you have more than one W2, add the amount from each W2.

	2020	2021 (estimated)
Salaries and wages for Parent/Guardian A	\$	\$
Salaries and wages for Parent/Guardian B	\$	\$

### **OTHER INCOME**

Please include all or other income received outside of salaries and wages.  
(i.e. Alimony, Social Security Benefits, Child Support, Investment Income, etc...)

Other Income Type	2020	2021 (estimated)
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

# Scholarship Application: **FAMILY ASSETS AND DEBTS**

## REAL ESTATE

	2020	2021 (estimated)
If you <b>PAY RENT</b> on the home you currently live in, provide the <b>TOTAL</b> amount you paid/will pay in rent for the entire year.	\$	\$

If you <b>OWN</b> the home you currently live in, provide the following information:				
Year Purchased (yyyy)	Purchase Price	Current Market Value	Unpaid Principal on 1st Mortgage	Annual Payments on 1st Mortgage
	\$	\$	\$	\$
If you have a <b>2nd mortgage</b> or home equity loan, provide the following information:				
Unpaid Principal on 2nd Mortgage	Unpaid Principal on 2nd Mortgage	Describe the purpose of the 2nd mortgage or equity loan:		
\$	\$			

If you own property other than your primary home, provide the following information for each property. If this property is used as a rental, please include the income (loss) in question 7q.

PROPERTY 1				
Address:		Purpose/Use of Property: Additional Family Home <input type="checkbox"/> / Rental Income <input type="checkbox"/> Vacation Home/Timeshare <input type="checkbox"/> / Vacant Land Other <input type="checkbox"/>		
Purchase Price	Current Market Value	Unpaid Principal on 1st Mortgage(s)	Annual Total Payments on 1st Mortgage(s)	
\$	\$	\$	\$	
PROPERTY 2				
Address:		Purpose/Use of Property: Additional Family Home <input type="checkbox"/> / Rental Income <input type="checkbox"/> Vacation Home/Timeshare <input type="checkbox"/> / Vacant Land Other <input type="checkbox"/>		
Purchase Price	Current Market Value	Unpaid Principal on 1st Mortgage(s)	Annual Total Payments on 1st Mortgage(s)	
\$	\$	\$	\$	
PROPERTY 3				
Address:		Purpose/Use of Property: Additional Family Home <input type="checkbox"/> / Rental Income <input type="checkbox"/> Vacation Home/Timeshare <input type="checkbox"/> / Vacant Land Other <input type="checkbox"/>		
Purchase Price	Current Market Value	Unpaid Principal on 1st Mortgage(s)	Annual Total Payments on 1st Mortgage(s)	
\$	\$	\$	\$	



# Scholarship Application: **FAMILY ASSETS AND DEBTS**

## VEHICLES

Provide the following information about all family vehicles (cars, recreational vehicles, boats) owned or leased by your family.

VEHICLE 1			
TYPE: Car <input type="checkbox"/> / Boat <input type="checkbox"/> Recreational Vehicle <input type="checkbox"/>	Make	Model	Year (yyyy)
OWNERSHIP STATUS: Own <input type="checkbox"/> / Lease <input type="checkbox"/> Provided By Employer <input type="checkbox"/>	Current Debt	Annual Lease Cost	Notes
	\$	\$	
VEHICLE 2			
TYPE: Car <input type="checkbox"/> / Boat <input type="checkbox"/> Recreational Vehicle <input type="checkbox"/>	Make	Model	Year (yyyy)
		\$	
OWNERSHIP STATUS: Own <input type="checkbox"/> / Lease <input type="checkbox"/> Provided By Employer <input type="checkbox"/>	Current Debt	Annual Lease Cost	Notes
	\$		
VEHICLE 3			
TYPE: Car <input type="checkbox"/> / Boat <input type="checkbox"/> Recreational Vehicle <input type="checkbox"/>	Make	Model	Year (yyyy)
OWNERSHIP STATUS: Own <input type="checkbox"/> / Lease <input type="checkbox"/> Provided By Employer <input type="checkbox"/>	Current Debt	Annual Lease Cost	Notes
	\$	\$	

# Scholarship Application: **FAMILY EXPENSES**

The information provided in this section helps schools better assess your full obligation to pay tuition and other educational expenses. Please be realistic about the amount you can contribute, keeping in mind that the primary responsibility for paying for your child's education lies with you.

## **EDUCATIONAL EXPENSES**

How many children (applicants and other dependents) are/will be receiving support from you in 2021?	
How many will attend tuition-charging institutions (childcare centers, schools or colleges)?	

### **LIST ALL OF THE TUITION CONTRIBUTIONS YOU RECEIVED IN 2020-2021**

How much money did you contribute from your own earnings or assets (including loans)?	\$
How much did you receive from state SB10 Program?	\$
How much did you receive in scholarship support?	\$
<b>What is the estimated full cost of tuition for this applicant for the academic year 2020-2021</b>	<b>\$</b>

### **LIST ALL OF THE TUITION CONTRIBUTIONS YOU PLAN TO MAKE IN 2021-2022**

How much money will you contribute from your own earnings or assets (including loans)?	\$
How much will you receive from state SB10 Program (estimated)?	\$
How much in scholarship support are you requesting?	\$
From all combined sources except financial aid your tuition contribution will be (add each amount in this section)?	\$

## **ADDITIONAL EXPENSES**

Total unusual expenses (major, unanticipated costs for non-routine situations)	\$
Itemize unusual expenses:	
Total annual fees/club dues for clubs that cost more than \$250	\$
Itemize annual fees/club dues:	
Total amount paid for camps and lessons in 2020 for all members of your household	\$
Itemize camps/lessons:	
Total amount paid for vacations in 2020 for all members of your household	\$

# Scholarship Application: **STATEMENT OF ACCURACY / CHECKLIST**

## **STATEMENT OF ACCURACY FOR STUDENTS/FAMILIES**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

I hereby understand that providing false information on this application may result in the revocation of scholarship funds.

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Signature of Scholarship Applicant

Date

## **CHECKLIST**

- Application
- Essay
- 2 letters of recommendation from a teacher or family friend (if required)
- 2020 Tax Returns

**DROP OFF OR MAIL COMPLETE APPLICATION PACKAGE TO**

**SPECIAL NEEDS SCHOOLS OF GWINETT**  
**660 Davis Rd, Lawrenceville, GA 30046**

## **REMINDER:**

**The deadline for this application to be received by the School's Office is:**

**April 16, 2021 by 2:00 p.m.**

**NO EXCEPTIONS!**

## **SPECIAL NEEDS SCHOOLS OF GWINNETT**

660 Davis Road, Lawrenceville, GA 30046 | 678-442-6262 | [SpecialNeedsSchools.org](http://SpecialNeedsSchools.org)

The Special Needs Schools of Gwinnett is a nonprofit, tax-exempt charitable organization under section 501(c)(3) of the Internal Revenue Code. Donations are tax-deductible as allowed by law.