

AAA Scholarship Foundation 2020-21 Application Nevada Educational Choice Scholarship Program

Submission deadline posted at www.aaascholarships.org

If you enroll your student in a private school before you have received a SCHOLARSHIP AWARD LETTER and School Commitment Form (SCF), you will be responsible for your student's tuition, and he/she may not qualify for future scholarship funding. Funding is not guaranteed. Please consider this before enrolling your student(s) in a private school.

ARE YOU ELIGIBLE TO SUBMIT AN APPLICATION? COMPLETE THE QUESTIONS BELOW TO FIND OUT.

1)	Does the household live in Nevada? Yes, please continue to question #2. No, we live in another state. <u>STOP</u> – do not apply; your household is NOT eligible.					
2)	 Will your student be between the required ages to attend school for your state on or before September 30, 2020? Yes, my Nevada student will be at least 5 years old but not 18 years old or older on September 30, 2020. Please continue to question #3. No, my Nevada student will be 18 years old on or before September 30, 2020. Please continue to question #3. No, my student will not meet the age requirements for my state. STOP – do not apply; your student does not qualify to receive a 2020-21 AAA scholarship. 					
3)	Is your student entering Kindergarten through 12th grade in Nevada? Yes, my student is entering Kindergarten through 12th grade in Nevada. Please continue to question #4. No, my student will NOT be entering those grades. <u>STOP</u> – do not apply, your student does not qualify to receive a 2020-21 AAA scholarship.					
	AAA considers ALL household members and their income. To figure out your household size, add ALL the people you live with together, this is your household size. Now add ALL the annual earnings (taxable and non-taxable) for everyone in the household; this is your total annual income. Use these two numbers to look at the income chart below for your household size and income. Is your household at or below the level for your household size? 2020-20201 Household Income/Financial Resources Table (Renewal means you signed AAA scholarship checks for this student in 2019-20. Transfer means this student received funding from another Scholarship Organization in 2019-20.)					
	*Business losses must be adjusted Household Size	RENEWAL & TRANSFER Max Awarded Up to: \$7,500	RENEWAL & TRANSFER Max Awarded Up to: \$5,625	RENEWAL & TRANSFER Max Awarded Up to: \$3,750	RENEWAL & TRANSFER Max Awarded Up to: \$1,875	
	1	\$25,520	\$28,710	\$31,900	\$38,280	
	2	\$34,480	\$38,790	\$43,100	\$51,720	
	3	\$43,440	\$48,870	\$54,300	\$65,160	
	4	\$52,400	\$58,950	\$65,500	\$78,600	
	Each additional person add:	\$8,960	\$10,080	\$11,200	\$13,440	
5)	Yes, we are <u>at or below</u> the income listed for our household size. Please continue to question #5. No, our income is above the limit listed for our household size. <u>STOP</u> – do not apply; your household does not qualify to receive a 2020-21 AAA scholarship. Is your household/ student otherwise eligible? Yes, neither my student nor my household has been disqualified from the program for any reason, including an internal audit					

BE SURE TO COMPLETE ALL PAGES OF THE APPLICATION, INCLUDING THE SIGNATURE PAGE.

process. Please continue to complete the application on the next page.

Questions? Call 1-888-707-2465 or Email NVdocs@aaascholarships.org

No, my student or our household has been disqualified/revoked from program participation for any reason, including an internal audit process in the past. **STOP** – do not apply; your household does not qualify for a 2020-21 AAA scholarship.

PARENT/GUARDIAN A Name:	SS#	

2020-2021 AAA - Nevada Educational Choice Scholarship Program Application - Page 2

IMPORTANT: Fill in the answers asked for in the blank spaces provided throughout this form; write N/A or 0 if items do not apply to you.

DO NOT LEAVE ANY BLANK SPACES.

A) PARENT/GUARDIAN "A" Living with the student This individual is required to sign scholarship checks.					B) PARENT/GUARDIAN "B" Living with the student This individual cannot sign scholarship checks.				
Parent A Last Name, First Name, Middle Initial							Name, Mide		aromp oncone.
Social Security Number E-mail address (REQUIRED)				Social Se	curity Num	ber	E-	E-mail address (REQUIRED)	
Relationship to the student:	<u> </u>			Relations	nip to the s	tudent	 ::		
	p-Father □ Step-Mother	□ Other		□ Father	□ Мо		•	ther 🗆 Step	
Home Phone Number	Cell Phone Number			Home Ph	one Numb	er	Ce	ell Phone Nu	umber
Home (Physical) Address, Apt.	# (must be a street addre	ess, PO Box	not a	cceptable)					
Home City, State, Zip						Hor	me County		
Mailing Address (if different from	n above)								
Mailing City			Ma	ailing State	:			Mailing	Zip
Parent A Employed By	Work Pho	ne		Parent B Employed By				Work Phone	
C) HOUSEHOLD INF	ORMATION								
1) Number of people who lived	in your home during 2019			6) List any parents, not living in the home, for children who live with Parent(s) A and B.					
Parents/Guardians + Children + Others = Total of above(This is your "household size")				Non-	Custodial I	Parent	's Name		Child's Name
2) What is the language spoken in your home:									
3) What is PARENT A's marita	•								
•	ivorced (Divorce Agreemen	. ,	۸						
	eparated (Separation Agree		ea)	7)					
□ Divorced/Remarried □ Widowed □ Living w/boyfriend, girlfriend, fiancé				7) Does PARENT A and/or B have a divorce/separation agreement? □ Yes □ No					
					(If YES, provide a copy of the divorce/separation agreement if you do not claim the child(ren) on your taxes to show that they live with you.)				
4) Does PARENT A receive child support for any children in the home? □ Yes □ No					8) Date of Separation (Month/Year) or N/A:				
5) Does PARENT B receive child support for any children in the home?					9) Date of Divorce (Month/Year) or N/A:				
D) HOUSEHOLD MEN You must provide All 2019 earnin List any additional people that live separate sheet of paper. Birth Ce	gs and assistance docume with you on a separate	nentation for sheet of pa	r the b per, if	elow indivi needed. If	- duals (For	m 1040	Federal T	ax Return, S	Social Security Income, etc.)
PLEASE PRINT Name	Relationship to Parent A			Did they	file 2019 eturn? (c e)	heck	or Ass	arnings istance d in 2019	How long has this person lived with PARENT A?
			[Yes	□No				
			[Yes	□ No				
			[Yes	□No				
			[∃ Yes	□ No				

PARENT/GUARDIAN A Name:	SS#
2020-2021 AAA - Nevada Educational Choice	Scholarship Program Application - Page 3
E) HOUSING INFORMATION	
1) Do you rent or own your residence (check one)?	vn
2) What is the monthly mortgage or rent payment? \$	per month
a. What amount do you pay? \$ per month	
b. What amount is paid by others? \$ per month.	Explain relationship to Parent A:
F) STUDENT INFORMATION (Only complete for s If applying for more than 2 students, make a copy of	
Student #1 Last Name, First Name, Middle Initial:	Date of Birth (MM/DD/YY) Birth Certificate Required:
Student SS#:	Student Gender: Female
Student Relationship to Parent/Guardian A:	ild □ Grandchild □ Niece/Nephew
Race: American Indian or Alaska Native Asian or Pacif	·
Grade Level Student will be entering in August of 2020:	·
Name of School attended 2019-2020:	
School County attended in 2019-2020:	
Type of School attended in 2019-2020: ☐ Private	
Does this student receive any of the following?:	□ Food Stamps □ FDPIR □ Free/Reduced Lunch □ ESE □ Title 1
Type of Student: ☐ Renewal ☐ Transfer	
(<u>Renewal</u> means you signed AAA scholarship checks for this student in 201 Organization in 2019-20.)	9-20. <u>Transfer</u> means this student received funding from another Scholarship
Student #2 Last Name, First Name, Middle Initial:	Date of Birth (MM/DD/YY) Birth Certificate Required:
Student SS#:	Student Gender: Female
Student Relationship to Parent/Guardian A: Child/Stepchild Other (Explain	d □ Grandchild □ Niece/Nephew
Race: American Indian or Alaska Native Asian or Pacif	
Grade Level Student will be entering in August of 2020:	277 - 1 - 11 - 2
Name of School attended 2019-2020:	
School County attended in 2019-2020:	
Type of School attended in 2019-2020: ☐ Private	
	☐ Food Stamps ☐ FDPIR ☐ Free/Reduced Lunch ☐ ESE ☐ Title 1
Type of Student: □ Renewal □ Transfer	

BE SURE TO COMPLETE ALL PAGES OF THE APPLICATION, INCLUDING THE SIGNATURE PAGE.

Questions? Call 1-888-707-2465 or Email NVdocs@aaascholarships.org

(Renewal means you signed AAA scholarship checks for this student in 2019-20. <u>Transfer</u> means this student received funding from another Scholarship Organization in 2019-20.)

2020-2021 AAA - Nevada Educational Choice Scholarship Program Application - Page 4					
G) TAXABLE INCOME The 2019 federal tax return for our household was: □ Filed (Complete all of Section G) □ Not filed yet (See Required Documentation section) □ I/We do not file. I/We only receive non-taxable assistance (Complete Section H and IRS Did Not File Statement on Page 7).					
1) Total number of dependents listed on 2019 Form	1040		#		
2) Total Income Reported on 2019 Form 1040 line 7b and forms and all Forms W-2)	(Attach a hand-sig	ned copy of the tax return, including all schedules	\$		
3) Net business income* from self-employment, farm	, rentals, and other I	businesses from Form 1040, Schedule 1, lines 3,	\$		
5, and 6 (Attach Schedules C, E, and/or F from you	ur 2019 Form 1040)				
* Business losses will be adjusted to zero, and therefore H) NON-TAXABLE EARNINGS AND List the total "ANNUAL" amount received by everyone in	ASSISTANC	CE	eligibility.		
1) Child Support	\$	6) Cash Assistance for 2019 (TANF)	\$		
Social Security Income (SSA/SSD, etc.) (Provide 2019 documentation for all recipients in household.)	\$	7) Food Stamps for 2019	\$		
Other non-taxable income (Working for cash, Adoption and/ or Foster Subsidy, Worker's Comp., Disability, Pension / Retirement, etc.)	\$	8) Housing Assistance for 2019 (Sec. 8, HUD, parsonage, etc.)	\$		
4) Gifts from family and/or friends	\$	9) Loans from family and/or friends	\$		
5) Personal Savings/Investment Accounts <u>used</u> for household expenses in 2019 (Do not include totals listed in Section I)	\$				
*You must provide 2019 documentation for items 2-9; eith I) UNUSUAL CIRCUMSTANCE (tell us	-		n 1/1/19-12/31/19		
☐ Loss of job ☐ Child support reduction ☐ Bankruptcy					
☐ Recent separation/divorce ☐ □			ability insurance		
☐ Change in work status ☐ □	Death in the househ	old Became eligible for soc	cial security		
☐ Income reduction	Change in custody	☐ Other	☐ Other		
Provide a brief explanation of the situation and attach d	ocumentation for all	circumstances checked above:			
·					

SS#

PARENT/GUARDIAN A Name:

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	2020-2021 AAA- Nevada I	Educational Choice Scholars	hip Program Application - Page 5			
K)	HOW DID YOU HEAR ABO	OUT AAA SCHOLARSHIP PRO	OGRAM?			
	Renewing Household	☐ Flyer, brochure or poster	☐ Internet Search			
	Another scholarship parent	$\hfill \square$ At an event in my community	\square Social Media (Facebook, Twitter, etc.)			
	Referred by friend, family or work associate not on scholarship	☐ Newspaper ad or article	☐ Employer communication			
	Referred by private school	☐ State Agency	☐ Other:			
con recover season on the contract of the cont	L) CERTIFICATION AND AUTHORIZATION SIGNATURE(S) I certify that the information provided on the application and all supporting documentation submitted at any time is true, correct, and complete to the best of my knowledge. I understand that if I give information that is not true or if I withhold information and my student(s) receive a scholarship for which they are not eligible, I can be lawfully punished for fraud, and the scholarship will be denied or revoked. I understand that any information I provide at any time will be verified, which may include computer file matching, public records search, IRS transcripts, and that I may be required to provide other information and/or documentation. I authorize the release of personal, financial, and educational information for the purpose of determining eligibility and for research. I understand that AAA Scholarship Foundation does not discriminate because of race, color, sex, age, disability, religion, nationality, sexual orientation, political affiliation, or gender identification or expression. I authorize AAA Scholarship Foundation and its application management system to make this form, the information therein, and all supporting documentation available to the appropriate state agencies as required by the law governing the scholarships. I agree to follow the rules and responsibilities as they apply to the program as set forth in the Parent and School Handbook, available online at www.aaascholarships.org. I understand that it is my responsibility to notify my child's public school district if I intend to withdraw him/her. I understand that it is my right and responsibility to read and understand a private school's admission and conduct policy before requesting to enroll my child(ren) into an eligible private school. I understand if I am deemed eligible and am awarded a scholarship, that I am not automatically entitled to a scholarship in the following years. I understand if I enroll my student(s) into a private school before receipt of a Scholarship Award					
M)	SIGNATURES (Must be handw	ritten. Electronic Signatures are not acce	•			
Pa	rent/Guardian A		Date			
Parent/Guardian B Date						
N)	REQUIRED DOCUMENTA	TION				
Th	e application MUST include the fo	llowing with the completed application	on (and any other documentation requested):			
	2019 <u>Hand-Signed</u> Form 1040 (No Electronic Signatures). All Schedules/Forms & all Forms W-2 (No Extensions Accepted) 2019 Non-taxable Earnings and Assistance Documentation, if applicable (Ex: Food Stamps, Housing Assistance, etc. Sworn Statement for IRS Did Not File Tax Return (page 7), if applicable (if you didn't file taxes) Letter/documentation of Unusual Circumstances, if needed Certificate of Eligibility to Transfer (page 6), if applicable					

SS#

PARENT/GUARDIAN A Name:

Mail All Pages of the Completed Application and Required Documentation to:

AAA Scholarship Foundation, P.O. Box 15719, Tampa, FL 33684-0719

Processing of applications is typically completed within 10-12 weeks once ALL required documentation is received.

To check the processing status of your application, go to https://webportalapp.com/sp/aaasf_20

Nevada Certificate of Eligibility to Transfer – Page 6				
This form is required if your student(s) is transferring to AAA from another Scholarship Organization (SO) and must be provided to AAA in order to complete the processing of your application. Make additional copies of this form if you have more than two students.				
This form is to be completed by the SO that funded the s year or the school that received funding from the SO for the a delay in processing .				
I/We (Parent/Guard school permission to release information about my child Foundation, Inc.				
Parent or guardian signature				
STUDENT NAME:				
DID THE STUDENT RECEIVE FUNDS FROM A SCHOLARSHIP ORGA	ANIZATION? YES NO			
NAME OF AWARDING SCHOLARSHIP ORGANIZATION(S):				
WHAT SCHOOL YEAR(S) DID THE STUDENT RECEIVE FUNDS?				
AMOUNT RECEIVED BY SCHOOL:				
STUDENT NAME (if additional)				
DID THE STUDENT RECEIVE FUNDS FROM A SCHOLARSHIP ORGA	ANIZATION? YES NO			
NAME OF AWARDING SCHOLARSHIP ORGANIZATION(S):				
WHAT SCHOOL YEAR(S) DID THE STUDENT RECEIVE FUNDS?	WHAT SCHOOL YEAR(S) DID THE STUDENT RECEIVE FUNDS?			
AMOUNT RECEIVED BY SCHOOL:				
This certifies that the student(s) listed above was the recipient of a Nevada Educational Choice Scholarship from an SO for the amounts and time periods listed above.				
Print Name of Authorized Representative Completing Form	Title			
Name of Awarding Scholarship Organization (SO) or School Comp	Name of Awarding Scholarship Organization (SO) or School Completing Form			
Signature of Authorized Representative Completing Form	Date			

__ SS# _____

PARENT/GUARDIAN A Name:

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1040. Each person may be REQUIRED to provide docume	for each adult living in the household who did not file a 2019 Formentation verifying their Did Not File status later this year. EVERY adultined as a dependent on a provided Tax Return must complete one		
I,(PRINT NAME) □ I received no taxable income. My non-taxable earnings o □ My taxable income received was less than the amount re □ Other (explain)	equired for filing with the IRS. Amount received: \$		
I was NOT required to file a 2019 Federal Income Tax Return. earnings and assistance documentation. UNDER PENALTY OF FOR THE 2019 YEAR AND I UNDERSTAND THIS FORM ACTS AS MALL OF THE STATEMENTS HERE ARE TRUE AND COMPLETE.	. In place of a tax return, I have completed this form and attached all PERJURY I DECLARE UNDER OATH THAT I DID NOT FILE A TAX RETURN MY VERIFICATION OF NON-FILING. I ALSO DECLARE UNDER OATH THAT		
Signature of Person Who Did Not File	Relationship to PARENT/GUARDIAN A/B		
	did not file a tax return for the following reason (check one): or assistance received was: \$equired for filing with the IRS. Amount received: \$		
earnings and assistance documentation. UNDER PENALTY OF	. In place of a tax return, I have completed this form and attached all PERJURY I DECLARE UNDER OATH THAT I DID NOT FILE A TAX RETURN MY VERIFICATION OF NON-FILING. I ALSO DECLARE UNDER OATH THAT		
Signature of Person Who Did Not File	Relationship to PARENT/GUARDIAN A/B		
I, (PRINT NAME) □ I received no taxable income. My non-taxable earnings o	did not file a tax return for the following reason (check one):		
 My taxable income received was less than the amount required for filing with the IRS. Amount received: \$ Other (explain) 			
I was NOT required to file a 2019 Federal Income Tax Return. earnings and assistance documentation. UNDER PENALTY OF	. In place of a tax return, I have completed this form and attached all PERJURY I DECLARE UNDER OATH THAT I DID NOT FILE A TAX RETURN MY VERIFICATION OF NON-FILING. I ALSO DECLARE UNDER OATH THAT		
Signature of Person Who Did Not File	Relationship to PARENT/GUARDIAN A/B		

PARENT/GUARDIAN A Name:______ SS# _____

Sworn Statements for IRS Did Not File Tax Return – Page 7

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