



**AAA Scholarship Foundation  
2020-21 Renewal Application  
Florida Tax Credit (“FTC”) Scholarship Program**

***Submission Deadline available at [www.aaascholarships.org](http://www.aaascholarships.org)***

If you enroll your student into 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 THIS APPLICATION? COMPLETE THE 5 QUESTIONS BELOW TO FIND OUT.**

- 1.) Does the household live in Florida?
  - Yes, please continue to question #2.
  - No, we live in another state. STOP – do not apply, your household is NOT eligible.
  
- 2.) Is your student entering Kindergarten through 12<sup>th</sup> grade in Florida?
  - Yes, my student is entering K through 12<sup>th</sup> grade in Florida. Please continue to question #3.
  - No, my student will NOT be entering those grades. STOP – do not apply, your student does not qualify to receive a 2020-21 AAA scholarship.
  
- 3.) Will your student be between the required ages to attend school for your state on or before September 1, 2020?
  - Yes, my Florida student will be at least 5 years old but not 21 years old or older on September 1, 2020. Please continue to question #4.
  - 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.
  
- 4.) Did your student have an FTC Scholarship during the 2019-2020 school year?
  - Yes, my student had an FTC Scholarship during the 2019-2020 school year. Please continue to question #5.
  - No, my student didn't have a FTC Scholarship during the 2019-2020 school year. STOP – do not use this renewal application to apply, your household will need to complete an initial application instead.
  
- 5.) Is your household / student otherwise eligible?
  - Yes, neither my student nor my household has been disqualified from the program for any reason, including internal audit process. Please continue to the next step.
  - No, my student or our household has been disqualified/revoked from program participation for any reason, including internal audit process in the past. STOP – do not apply, your household does not qualify for a 2020-21 AAA scholarship.

**If you believe you are eligible to renew your FTC scholarship, please complete the following application.**

*This application is the ONLY chance you have to explain your household situation. Please use additional paper if needed to give us ALL needed information to determine your eligibility. All information must be disclosed NOW. Failure to fully document and complete this application WILL result in your application being denied. You will not be able to provide additional information after processing to change the decision of eligibility made based on the original application and documentation.*

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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**      **B) PARENT/GUARDIAN "B" Living with the student**

This individual is required to sign scholarship checks.

This individual cannot sign scholarship checks.

Parent A Last Name, First Name, Middle Initial		Parent B Last Name, First Name, Middle Initial	
Social Security Number	E-mail address (REQUIRED)	Social Security Number	E-mail address (REQUIRED)
Relationship to the student: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Step-Mother <input type="checkbox"/> Other		Relationship to the student: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Step-Mother <input type="checkbox"/> Other	
Home Phone Number	Cell Phone Number	Home Phone Number	Cell Phone Number
Home (Physical) Address, Apt. # (must be street address, PO Box not acceptable)			
Home City, State, Zip		Home County	
Mailing Address (if different from above – PO Box acceptable)			
Mailing City	Mailing State	Mailing Zip	

**B) STUDENT INFORMATION (Only complete for students for whom you want a scholarship)**

If applying for more than 2 students, make a copy of this page before completing every question.

Student #1 Last Name, First Name, Middle Initial:	Date of Birth (MM/DD/YY) <i>Birth Certificate Required:</i>
Student SS#:	Student Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Student Relationship to Parent/Guardian A:	<input type="checkbox"/> Child/Stepchild <input type="checkbox"/> Grandchild <input type="checkbox"/> Niece/Nephew <input type="checkbox"/> Other (Explain) _____
Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black, non-Hispanic <input type="checkbox"/> Hispanic <input type="checkbox"/> Mixed Race <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White, non-Hispanic
Grade Level Student will be entering in August of 2020:	
Name of School attended 2019-2020:	
School County attended in 2019-2020:	
Does this student receive any of the following?: <input type="checkbox"/> TANF <input type="checkbox"/> Food Stamps <input type="checkbox"/> FDPIR <input type="checkbox"/> Free/Reduced Lunch <input type="checkbox"/> ESE <input type="checkbox"/> Title 1	
Type of Student: <input type="checkbox"/> Renewal <input type="checkbox"/> Add-On (birth certificate required) ( <u>Renewal</u> means you signed AAA scholarship checks for this student in 2019-20. <u>Add-on</u> means you signed AAA scholarship checks for another student in your home in 2019-20, but not for this student.)	

Student #2 Last Name, First Name, Middle Initial:	Date of Birth (MM/DD/YY) <i>Birth Certificate Required:</i>
Student SS#:	Student Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Student Relationship to Parent/Guardian A:	<input type="checkbox"/> Child/Stepchild <input type="checkbox"/> Grandchild <input type="checkbox"/> Niece/Nephew <input type="checkbox"/> Other (Explain) _____
Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black, non-Hispanic <input type="checkbox"/> Hispanic <input type="checkbox"/> Mixed Race <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White, non-Hispanic
Grade Level Student will be entering in August of 2020:	
Name of School attended 2019-2020:	
School County attended in 2019-2020:	
Does this student receive any of the following?: <input type="checkbox"/> TANF <input type="checkbox"/> Food Stamps <input type="checkbox"/> FDPIR <input type="checkbox"/> Free/Reduced Lunch <input type="checkbox"/> ESE <input type="checkbox"/> Title 1	
Type of Student: <input type="checkbox"/> Renewal <input type="checkbox"/> Add-On (birth certificate required) ( <u>Renewal</u> means you signed AAA scholarship checks for this student in 2019-20. <u>Add-on</u> means you signed AAA scholarship checks for another student in your home in 2019-20, but not for this student.)	

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**C) 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 certify that no parent/guardian of a student on this application is an owner, operator, principal or person with equivalent decision making authority of an eligible private school or not at the school which my student will attend.
- ✓ 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 to make this form and the information therein 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](http://www.aaascholarships.org).
- ✓ I understand if I am deemed eligible and am awarded a scholarship, that I am not automatically entitled to a scholarship in following years.
- ✓ 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 responsibility to reapply and document my eligibility whenever I am required to if I accept a scholarship.
- ✓ I understand if I enroll my student(s) into a private school before receipt of a Scholarship Award Letter and School Commitment Form (SCF), I will be responsible for their tuition and the student(s) may not qualify for future scholarship funding. I understand funding is not guaranteed.
- ✓ 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 consent and agree that AAA Scholarship Foundation may obtain my child's free and reduced price meal and free milk eligibility information for the purpose of helping to determine my child's eligibility for the Florida Tax Credit Scholarship Program. I understand that this information will not be shared with any other entity or program. In addition, I may limit my consent to only those programs with which I wish to share this information.

**D) SIGNATURES** (Hand-Signed only. E-Signatures will not be accepted)

Parent/Guardian A \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian B \_\_\_\_\_ Date \_\_\_\_\_

**E) REQUIRED DOCUMENTATION FOR ELIGIBILITY DETERMINATION**

Application MUST include the following with the completed application (and any other documentation requested):

- Birth Certificates required for all add-on children 18 years of age and younger

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

AAA Scholarship Foundation  
P.O. Box 15719  
Tampa, FL 33684-5719

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\\_floridaincome\\_20](https://webportalapp.com/sp/aaasf_floridaincome_20)  
Questions? Call 1-888-707-2465 or Email [FLdocs@aaascholarships.org](mailto:FLdocs@aaascholarships.org)