



AAA Scholarship Foundation
Florida Tax Credit and Family Empowerment
Scholarship Programs
2021-2022 School Year
Renewal and Military Family Application

Current deadline on website at www.aaascholarships.org

This renewal and military family application is for both the Florida Tax Credit and Income-Based Family Empowerment Scholarship programs.

If you enroll your student(s) 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 AN APPLICATION? COMPLETE THE QUESTIONS BELOW TO FIND OUT.

- 1.) Does the household live in Florida and/or have current military orders indicating you are stationed 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 12th grade in Florida?
 - Yes, my student is entering K through 12th 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 2021-22 scholarship.
- 3.) Will your student be between the required ages to attend school for your state on or before September 1, 2021?
 - Yes, my Florida student will be at least 5 years old but not 21 years old or older on September 1, 2021. 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 2021-22 scholarship.
- 4.) Did your student have a Florida Tax Credit or Family Empowerment Scholarship awarded by AAA during the 2020-2021 school year?
 - Yes, my student had a Florida Tax Credit or Family Empowerment Scholarship during the 2020-2021 school year. Please continue to question #6.
 - No, my student didn't have a Florida Tax Credit or Family Empowerment Scholarship during the 2020-2021 school year. Please continue to question #5.
- 5.) Is the student's parent or guardian a member of the U.S. Armed Forces?
 - Yes, please continue to question #6.
 - No, the student's parent/guardian is not a member of the U.S. Armed Forces. STOP – do not use this renewal and military application to apply, your household will need to complete an initial application instead.
- 6.) 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 application on the next page.
 - 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 2021-22 scholarship.

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

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 (check one): <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 (check one): <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Step-Mother <input type="checkbox"/> Other	
Member of the U.S. Armed Forces? Yes / No (circle one)	Cell Phone Number:	Member of the U.S. Armed Forces? Yes / No (circle one)	Cell Phone Number:
Home (Physical) Address, Apt. # (must be street address, PO Box not acceptable):			Home Phone Number:
Home City, State, Zip:		Home District/County:	
Mailing Address – NOT SCHOOL 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)	
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 2021:			
Name of School attended 2020-2021:			
School District/County attended in 2020-2021:			
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 (See section D for required documentation) <input type="checkbox"/> Transfer (See section D for required documentation) (<u>Renewal</u> means you signed AAA scholarship checks for this student in 2020-21. <u>Add-on</u> means you signed AAA scholarship checks for another student in your home in 2020-21, but not for this student. <u>Transfer</u> means this student received funding from SUFS in 2020-21.)			

Student #2 Last Name, First Name, Middle Initial:		Date of Birth (MM/DD/YY)	
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 2021:			
Name of School attended 2020-2021:			
School District/ County attended in 2020-2021:			
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 (See section D for required documentation) <input type="checkbox"/> Transfer (See section D for required documentation) (<u>Renewal</u> means you signed AAA scholarship checks for this student in 2020-21. <u>Add-on</u> means you signed AAA scholarship checks for another student in your home in 2020-21, but not for this student. <u>Transfer</u> means this student received funding from SUFS in 2020-21.)			

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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.
- ✓ 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.

D) REQUIRED DOCUMENTATION FOR ELIGIBILITY DETERMINATION

You MUST include the following with the completed and hand-signed application, as applicable:

- Birth Certificates required for all military, transfer and add-on children
- Proof of residence required for all military, transfer and add-on children
- If applicable, a military id card (active only) along with one of the following 1) current military orders showing that you are stationed in Florida, or 2) Florida Driver's License for all members of the U.S. Armed Forces
- Florida Certificate of Eligibility to Transfer Form required for all transfer children (page 4 of application)

Note: additional documentation may be requested by AAA's application processors during the determination process. Please be sure to check your email for communication from AAA about your application.

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

Parent/Guardian A _____ Date _____

Parent/Guardian B _____ Date _____

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

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

Processing of renewal applications is typically completed within 6-8 weeks once ALL required documentation is received.

To check the processing status of your application, log into https://webportalapp.com/sp/aaasf_floridaincome_21 using the same email address and password that you used last year.

Questions? Call 1-888-707-2465, extension 6, or email us at FLdocs@aaascholarships.org

Parent Name: _____ Household ID # _____

Florida Certificate of Eligibility to Transfer – Page 4

This form is required if you wish to transfer your child(ren)'s Florida scholarship to AAA.

- 1) Fill out this form with the name(s) of the child(ren) whose scholarship(s) you are transferring and then sign where indicated. Print additional copies of this form if you have more than two children.
- 2) AAA will send the completed and signed form to your child's school to confirm that the scholarships are eligible for transfer to AAA and to release last school year's scholarship payment data to AAA.

I/We _____ (print Parent name) give _____
_____ (print name of school) permission to release information about
my child(ren)'s scholarship history to AAA Scholarship Foundation.

Transferring Student #1 Name: _____

Transferring Student #2 Name: _____

Parent or guardian signature

Date signed

****THIS SECTION TO BE COMPLETED BY AN AUTHORIZED REPRESENTATIVE OF THE SCHOOL ONLY****

DID STUDENT #1 RECEIVE SCHOLARSHIP FUNDING LAST SCHOOL YEAR? YES _____ NO _____

FOR WHAT TYPE OF SCHOLARSHIP DID THE STUDENT RECEIVE FUNDING? _____

AMOUNT FUNDED LAST SCHOOL YEAR: _____

INDICATE WHETHER THE FUNDING WAS RECEIVED FROM FL DOE _____ OR STEP UP FOR STUDENTS _____

DID STUDENT #1 RECEIVE SCHOLARSHIP FUNDING LAST SCHOOL YEAR? YES _____ NO _____

FOR WHAT TYPE OF SCHOLARSHIP DID THE STUDENT RECEIVE FUNDING? _____

AMOUNT FUNDED LAST SCHOOL YEAR: _____

INDICATE WHETHER THE FUNDING WAS RECEIVED FROM FL DOE _____ OR STEP UP FOR STUDENTS _____

This certifies that the information provided above is true and correct to the best of my knowledge.

Printed Name of Authorized Representative Completing Form

Title

Signature of Authorized Representative Completing Form

Date

**Mail or Email this Form along with All Pages of the Completed Application
and Required Documentation to:**

AAA Scholarship Foundation, P.O. Box 15719, Tampa, FL 33684-5719
Questions? Call 1-888-707-2465 or Email FLdocs@aaascholarships.org