

# Greater Port Washington Kiwanis Club

## Preschool Scholarship

Dedicated to the Children in the Greater Port Washington Area

### APPLICATION FOR SCHOLARSHIP

Scholarships will be awarded based on family financial need. In order to understand your need better and provide scholarship dollars needed, it is necessary for you to complete the following information. This information will be kept confidential and only the Scholarship Foundation Board of Directors will have access to it.

#### PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS

##### Names and Ages of all Household Members

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

\*Gross Monthly income of adults in home: \_\_\_\_\_

\*Monthly income from Welfare payments, Child Support or Alimony: \_\_\_\_\_

\*Any other Monthly income: \_\_\_\_\_

**\*\*\*If you are working, please attach a recent check stub\*\*\***

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Have you applied to a local Preschool at this time? \_\_\_\_\_

Which one? \_\_\_\_\_

What is the tuition for one semester? \_\_\_\_\_ (Scholarships are given for one semester at a time)

Have you applied for any additional funding for your child's preschool tuition? \_\_\_\_\_

Depending on the number of applications and the money available for either full or partial tuition, what portion of the tuition are you able to contribute? \_\_\_\_\_

What transportation arrangements do you have to get your child to and from preschool?

\_\_\_\_\_

Has your child attended preschool before? \_\_\_\_\_ Where? \_\_\_\_\_

How long did he/she attend? \_\_\_\_\_

How do you expect preschool to benefit your child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you suspect your child to have any special learning needs or delays in the following areas?

Speech and Language: \_\_\_\_\_ Behavior: \_\_\_\_\_

Large Motor Skills (running, jumping, hopping, balancing, ball handling) \_\_\_\_\_

Fine/Small Motor Skills (holding crayons or markers to draw/color, using scissors, manipulating small objects)

\_\_\_\_\_

Any other Readiness Skills (such as: color identification, counting, attending to stories, taking turns, etc.)?

\_\_\_\_\_

PLEASE ATTACH A NARRATIVE ON A SEPARATE PAGE TO SHARE ANY OTHER INFORMATION ABOUT YOUR CHILD OR SITUATION THAT WILL ASSIST THE BOARD OF DIRECTORS IN REVIEWING YOUR APPLICATION AND YOUR DESIRE FOR YOUR CHILD TO ATTEND PRESCHOOL.



I certify that the information provided on this Scholarship Application is true and correct and that all income is reported. I understand that deliberate misrepresentation of the information may result in loss of Scholarship awards to my child.

Signature of Parent/Guardian: \_\_\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

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

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

City, State, ZIP: \_\_\_\_\_

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

Thank you for completing this information. The Board of Directors meets monthly to review applications. You will be notified by phone or mail regarding the Board's decision regarding your application. Checks for tuition scholarships will be sent directly to the preschool. Be sure to provide accurate information.

**Scholarships are given ONLY for 3-year old preschool in the Port Washington-Saukville school district, as the School District now offers FREE 4-year old preschool.**

PLEASE NOTE THIS IMPORTANT CHANGE

\*\*\*We raise money for our scholarships through our fundraising events. Please help us continue to provide scholarships by giving 2-4 hours of your time at our Fundraising Events. It's fun, it goes quickly, and you make some new friends and help other families and kids in need. **By accepting your scholarship, you give us permission to request your time for our fundraising events.**

**Send Completed Application to:**

GPWKC (Greater Port Washington Kiwanis Club)  
Preschool Scholarship  
P.O. Box 406  
Port Washington, WI 53074

