

Medina Early Childhood PTA (MECPTA)
Diane E. Guenther Preschool Scholarship Application
For the 2010-2011 school year

CONFIDENTIAL

PLEASE FILL OUT COMPLETELY (the more complete, the better we are able to make a decision)

Child's Name _____ Birthdate _____ Age _____

Parent(s)' Name _____ Home phone _____

Address _____

Cell Phone (father) _____ (mother) _____

How long at present address? _____ Do you rent or own? _____

What is your annual income? (if married, please enter the combined amount or if receiving child support, please include this amount in the total) _____

Please list other sources of income? _____

Mother's place of employment _____ Phone _____

Length of time with current employer _____

Father's place of employment _____ Phone _____

Length of time with current employer _____

Are you applying for/receiving aid anywhere else? Yes No

Why are you applying for financial aid? Please include any special circumstances that the committee should be aware of that might be of help in their recipient selection. (e.g. Extensive medical bills due to unusual illness, etc.)

Could part of the tuition be furnished, and if yes, what amount? Yes No Amount \$\$ _____

Why do you want your child to attend preschool? _____

Have you selected a preschool yet? _____ If so, which one? _____

List other siblings and ages (name) _____ (age) _____ (name) _____ (age) _____

(name) _____ (age) _____ (name) _____ (age) _____

Will other siblings be attending preschool at the same time? _____

If so, name them _____

Where did you receive this application? _____

All applications will be given equal consideration
and all applications will be kept in the **strictest confidence**.

To the best of my knowledge and belief, the information provided on this application is true.

Parent's signature _____ Date _____

Send completed application to:

Amandaosborn07@gmail.com

OR

MECPTA
c/o Amanda Osborn
5114 Hanover Drive
Medina, OH 44256

****PLEASE RETURN BY March 31, 2010****