

# TLC Scholarship Application 2010-2011

**Trumbull Loves Children, Inc.**

P.O. Box 162  
Trumbull, CT 06611

School: \_\_\_\_\_

Date of Application: \_\_\_\_\_

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Trumbull Loves Children, Inc. would like to award qualified individuals scholarships towards fees for children attending TLC programs. In an attempt to provide this scholarship, we need to determine eligibility and the amount awarded to each family. Please complete the following information and return to TLC.

**Please send to the attention of Ken McCabe, Executive Director; all information on this application will be held confidential.**

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Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Other Dependents: \_\_\_\_\_

**Days Needed:**     Monday     Tuesday     Wednesday     Thursday     Friday

**Time(s) Needed:**

Before School     Morning K     Afternoon K     After School

Pre-School School Day (7-4)     Pre-School Extended Day (7-6)

**TLC Monthly Program Fee:** \_\_\_\_\_

**(Please see Fee chart on page 4)**

**Requested Monthly Fee:** \_\_\_\_\_

*(What amount do you feel you could pay with assistance?)*

**Parent Information:**

Father's Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Occupation:

\_\_\_\_\_

Employer:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Length of employment:

\_\_\_\_\_

Gross Pay: \_\_\_\_\_

Net Pay: \_\_\_\_\_

*(Please attach copy of pay stub)*

Paid:  weekly  bi-weekly  monthly

Mother's Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Occupation:

\_\_\_\_\_

Employer:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Length of employment:

\_\_\_\_\_

Gross Pay: \_\_\_\_\_

Net Pay: \_\_\_\_\_

*(Please attach copy of pay stub)*

Paid:  weekly  bi-weekly  monthly

**Other sources of income:** (second job, child support, rental income, disability income, social security, etc. **Please provide proper documentation.**) \_\_\_\_\_

\_\_\_\_\_

Is there any other additional information we should know? Please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Trumbull Loves Children, Inc. does not discriminate against any race, color, and creed, national or ethnic origin.**

\_\_\_\_\_  
*Father's Signature*

\_\_\_\_\_  
*Mother's Signature*

## Financial Information

**\*All applicants must provide their signed & filed 2009 Federal Income Tax Returns with this application, along with all verified income. Your application will not be processed without all the proper documentation of income and expenses.**

List all *monthly* expenses for your household. Do not include any items that are payroll deductions.

### **Loan Information**

*Please attach a copy of payment or coupon books*

Rent or Mortgage Payments	\$ _____
Condominium Common Charges	\$ _____
Car Loan	\$ _____
Student Loans	\$ _____
Home Equity Loans	\$ _____
<i>Total Loans:</i>	\$ _____

### **Utilities**

Electric	\$ _____
Heat	\$ _____
Water	\$ _____
Cable TV	\$ _____
<i>Total Utilities</i>	\$ _____

### **Support**

Child Support Payments	\$ _____
Dependents not living at home	Name: _____
	Age: _____
Alimony	\$ _____
<i>Total Support Payments</i>	\$ _____

### **Other Expenses:**

<b>Total Monthly Expenses:</b>	\$ _____
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For TLC use only

Date Received: ____/____/____	Reviewed by: _____	Scholarship Applied: _____
Notification Date: ____/____/____	Fee 1: \$ _____	Fee 2: \$ _____

**2010 – 2011 MONTHLY FEES\***

TLC understands how these difficult economic times affect all our families, and has made every effort to minimize the impact of this by increasing fees the least amount possible. Please contact us if you are in need of additional financial assistance.

**ELEMENTARY SCHOOL PROGRAM**

Time Slot	1 <sup>st</sup> Child Rate			2 <sup>nd</sup> + Child Rate		
	5 days	3 days	2 days	5 days	3 days	2 days
Before School 7:00am - 8:30am	184	135	99	156	116	84
Kindergarten 8:30am - 11:45am or 12:05pm - 3:20pm	273	202	146	232	171	124
After School ** 3:20pm – 6:00pm	286	210	152	242	179	129
Before School and After School	443	327	237	377	277	202
Before School and Kindergarten	431	318	231	367	271	196
Kindergarten and After School	530	392	285	450	333	242
Before School, Kindergarten and After School	667	493	357	567	419	303
**After School FUN ZONE (excluding Daniels Farm students only)	269	198	142	229	169	122

**\*\* For FUN ZONE students (excluding Daniels Farm), because of the additional travel time for these students, TLC has adjusted their after-school rates accordingly.**

When more than one child from a family is attending TLC, the highest program fee will be designated as the first child, and additional children will be designated as second child.

For example, a family has a kindergarten child and a child in 2<sup>nd</sup> grade. Each child attends TLC after school five days per week. The Kindergarten child also attends the TLC kindergarten time slot. The fee will be calculated as follows:

1 <sup>st</sup> Child Kindergarten and After School	=	\$530
2 <sup>nd</sup> Child After School	=	\$242
<b>Total monthly fees</b>	<b>=</b>	<b>\$772</b>

**MIDDLE SCHOOL - AFTER SCHOOL PROGRAM (ASP)**

After School Program 2:35pm - 6:00pm	<u>5-day</u>	<u>4-day</u>	<u>3-day</u>	<u>2-day</u>	<u>1-day</u>
	266	223	175	122	64
2 <sup>nd</sup> + Child Rate	226	192	149	104	55

**\*All fees are monthly effective August 31, 2010.**

Fees are based on a 10 month school year payable in 9 equal payments, plus a June fee equal to 75%.