



## Rising Stars Preschool Scholarship Application

Name of Applicant and Date of Birth: \_\_\_\_\_

Names of Other People in the Household: \_\_\_\_\_

Names and Ages of Dependents: \_\_\_\_\_

Annual Household Income: \_\_\_\_\_

Address, City and Zip Code: \_\_\_\_\_

\_\_\_\_\_

Contact Information: (phone number and email address)

\_\_\_\_\_

Mother's Current or Last Employer, including Title and Contact Information: \_\_\_\_\_

Father's Current or Last Employer, including Title and Contact Information: \_\_\_\_\_

Please describe why you feel you should be considered for our Rising Stars Preschool Scholarship. Please include any hardships you currently face as well as how this scholarship will help you and your child get ahead in your life goals. The more detail you provide, the better equipped we will be in order make a fair decision. Please feel free to use your own paper or the lines provided.

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