## UPK Scholarship Income & Residency Verification Form 2021-2022

This form is required to document the parents' eligibility for a UPK scholarship based on their gross income and to document that families receiving scholarship assistance are residents of Cuyahoga County. Please attach the document(s) used to verify the parents' income and residency.

Child Care Provider:				Name of Child:				
Date:								
Document used to verify Caretakers' Total Family Gross Income (please atta				ch):		Check one:	Weekly Bi-Weekly Monthly Bi-Monthly Annually	
Check all that apply:								
Two most rece	ent check stubs (PRE	FERRED)						
/	creturn AND IRS For							
		come (award letter a	and/or summa	ry statem	nent)			
	cumentation of self-						and the Obstitutions	
A copy of the c	childcare authorizati	on letter for subsidize	ed care (Only i	t \$0 co-p	ay)		nvest in Children	
If caretaker did not prov	ida abildaara authariza	tion lattor residency w	ac documented	hu (nlagoa	attachle			
Check one:		nion letter, residency w	us uocumenteu i	Jy (pieuse	uttuch).			
	neck stub with home	address				-	UPK	
	of identification with							
Current utility								
Total Family ANNUAL Gross Income: Family   (Calculate from above OR Based on Line 22 from IRS 1040 Tax Return) Family					Size: Note: Annual Family Gross Income and family size must be entered into ChildPlus.			
Indicate where the ca	aretakers' ANNUAL (	GROSS income falls or	n the Federal P	overty L	evel Scale (ref	er to table bel	ow)	
Check one:	Below 100% FPL			I attest that all income and residency information is true and accurate, and I will inform the provider of any changes. I understand that by submitting this				
_	Below 200% FPL				information my child is entitled to scholarship assistance of one-half of the			
	Delaw 2000/ 55	parent fee if my income is below 200% of the FPL; or scholarship assistance of thirty-three percent of the parent fee if my income is more than 200% FPL but less than 300% of the FPL; or scholarship assistance of twenty-five percent of the						
_	Below 300% FPL							
	Below 400% FPL				parent fee if my income is more than 300% FPL but less than 400% of the FPL.			
_	Delow 400% FF	L						
Above 400% FPL (over income)					x			
				A Parent Signature				
				rucht	olonatal c			
2021 Federal Povert	ty Guidelines – Annı	ual Gross Income						
Scholarship Rate	te 50%			33%			Office Use Calu	
Household Members	100%	200%	300%		400%		Office Use Only:	
1	\$12,880	\$25,760	\$38,640	)	\$51,520	Flid	gible: Ineligible:	
2	\$17,420	\$34,940	\$52,410	)	\$69,880			

50%: \_\_\_\_\_ 33%: \_\_\_

Date: \_

**Scholarship Rate:** 

\$133,980 \* For families/households with more than 8 persons, add \$4,540 for each additional person. \*\* The 2021 poverty guidelines are in effect as of January 13<sup>th</sup>, 2021. For additional information on Federal Poverty Guidelines, please visit: federalregister.gov

\$65,880

\$79,500

\$93,120

\$115,740

\$120,360

\$87,840

\$106,000

\$124,160

\$142,320

\$160,480

\$178,640

- The original application shall be placed in the student's file.

\$21,960

\$26,500

\$31,040

\$35,580

\$40,120

\$44,660

\$43,920

\$53,000

\$62,080

\$71,160

\$80,240

\$89,320

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- To submit this application via email (preferred): Scan this form and all relevant documents and email to Daniel Moss at Invest In Children: daniel.moss@jfs.ohio.gov. Please include the word SCHOLARSHIP in the subject line. (This form must be included to ensure timely processing.) - To submit this application via mail: Please send to Daniel Moss, UPK Program Manager, 8111 Quincy Ave. 2<sup>nd</sup> Floor, Cleveland, OH 44104

Revised 05/20/2021