



HELPING HANDS SCHOLARSHIP & TRANSPORTATION 2019-2020 PROGRAM GUIDELINES

Purpose: The Brea Resource Center assists income-eligible Brea residents with a scholarship for childcare purposes. For the 2019-2020 school year, annual after school program fees are \$660 (full payment) or \$680 (payment plan). Qualified residents will be eligible for a full or partial scholarship. Partial Scholarship covers a student's registration fee of \$120. Payments will then be auto-debited the 1st of the month starting September 1st and ending March 1st. Payments are \$80 per month/per child. A late fee of \$25 is automatically charged to any payments that do not go through. **Applications are due by July 31st.**

How to apply: Complete the attached application form and return to the Brea Resource Center along with copies (we will NOT make copies) of the following documents:

After School/Teen Program Scholarship:

- Proof of Brea residency via a current utility bill.
- A COPY State and Federal Tax Returns for 2018 for all working adults in the household.
- COPY of two (2) most recent pay stubs for every employed adult in household.
- COPY of two (2) most recent monthly statements for every bank account, for every adult in the household. **Please note that we need every page of the bank statement.** (Although, this is an intrusive process, the goal is to determine whether or not other means exist to pay for the program.)
- A COPY of any Child Support received.
- If income status has changed recently (not reflected on previous year's tax return) client must provide sufficient back-up documents. (Legal separation documents, death certificate, etc.)
- **If you have received a scholarship within the past 2 years you will not be eligible to receive one this year.**

Van/Transportation Program:

- A COPY State and Federal Tax Returns for 2018 for all working adults in the household.
- **OR**
- COPY of two (2) most recent pay stubs for every employed adult in household.
- **IF** you qualify for a free van spot you **MUST** provide proof of Brea residency via a Utility Bill.

PLEASE NOTE: APPLICATIONS WILL NOT BE PROCESSED UNLESS ALL DOCUMENTS ARE PRESENTED. APPROVALS WILL BE BASED ON NEED AND ON A FIRST COME, FIRST SERVED BASIS.

*****SCHOLARSHIP APPLICATIONS WILL NOT BE PROCESSED UNTIL AFTER JULY 1st**

*****THE VAN LOTTERY WILL BE DRAWN ON AUGUST 1st AND PHONE CALLS WILL BE MADE WITHIN 72 HOURS**

*****DUE TO THE NUMBER OF APPLICATIONS WE RECEIVE WE CANNOT BE RESPONSIBLE TO RETURN DOCUMENTATION INCLUDED WITH YOUR APPLICATION. PLEASE INCLUDE COPIES OF DOCUMENTS. WE WILL DESTROY DOCUMENTS AFTER THEY ARE PROCESSED.**



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<u>Eligibility for After School/Teen Program Scholarship</u>	<u>Eligibility for Van</u>
<ul style="list-style-type: none"> •Applicant must live in the City of Brea and provide proof of current address. •Applicant must provide proof of employment for EVERY ADULT in the household to verify need for childcare. •Applicants must demonstrate there are no other means available to pay for childcare costs at this time. •Applicant’s household income must not exceed the maximum income limits as listed below 	<ul style="list-style-type: none"> •Applicant’s household income must not exceed the maximum income limits as stated below. •State and Federal Tax Returns for 2018 for all working adults in the household. OR the two most recent paystubs for all working adults in the home. •Applicant must live in City of Brea for FREE van spot •Applicant must live, work, or have children who attend school in Brea for PAID van spot. •Jr. High Van applicants’ spots will be \$200 for the year (\$20/month auto-debit payment plan). Free van spots assigned based on eligibility for scholarship.

FAMILY #	ASP Scholarship (\$660) Free Van Spot	ASP Partial Scholarship (\$120)	Paid Elementary School Van Spot ONLY (\$200)
1	\$28,884	\$43,326	\$58,490
2	\$39,105	\$58,658	\$79,188
3	\$49,326	\$73,989	\$99,885
4	\$59,548	\$89,322	\$120,585
5	\$69,769	\$104,654	\$141,283
6	\$79,990	\$119,985	\$161,980
7	\$90,211	\$135,317	\$182,678
8	\$100,433	\$150,650	\$203,378

*Based on California Department of Education Income Guidelines for free and reduced-priced meals (Hot lunch program)

VAN TRANSPORTATION

*Families making more than the listed amounts under “Paid Van Spot” do not qualify for the van program. The van is intended for low-income families, with the exception of Brea Junior High.

*All Van spots will be chosen through a lottery, including the Jr. High School.

*If granted a Jr. High van spot, you must pay program registration and van fee/set up payment plan, IF you would like to be screened for a free van spot you need to turn in the applicable paperwork

All information and data on the application will be verified. The application will be maintained by the Agency staff in a Program file, all other materials relating to eligibility will be destroyed. Please note there may be up to a two-week waiting period for approval of application.



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Parent Name: _____
 First Middle Last

Address: _____ CA _____
 Street Address Unit # City State Zip Code

NO P.O. Boxes

Home or Cell Telephone: (_____) _____ Email: _____

List **EVERY** family member currently residing in the household (Include all adults and children):

Full Name	Age	Grade in 18/19	School (if applicable)	Relationship to applicant	Applying For:	
					Van	Scholarship

Initial the line next to each statement to indicate understanding:

1. I understand that completion of an application does not guarantee automatic funding for the After School Program & Transportation. _____
 2. I understand that if I receive a scholarship it is only for partial payment of the total program cost and I am responsible for the remaining balance. _____
 3. I understand that if any submitted information is found to be untrue or falsified, the scholarship funds will be pulled and I will be held accountable for the full cost of the program. _____
 4. I understand that if I do not meet the current guidelines I may not be eligible for future scholarship funding. _____
 5. My child must have at least 50% attendance for the After School Program/Teen Zone_____
- I consent to receive periodic emails regarding upcoming BRC programs, services and events.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY
 Date Approved_____ Approved By_____ Date Received in Office_____ Van Only_____ Application Denied_____ Amount Received_\$_____