August 8, 2019

Dear Parent(s)/Guardian(s) & Student(s) –

Champions For Learning is looking for deserving students with good grades, good attendance, good behavior who desire to make a difference and pursue postsecondary education. Take Stock in Children (TSIC) is a unique, comprehensive college and career program. The program offers students a caring volunteer mentor, a professional College Success Coach, College Readiness support, and upon successful completion and participation in the TSIC program, students earn a two-year state college scholarship.

Champions For Learning serves as the lead agency in the Collier County area for the TSIC program. Before a student can be selected for the program, Champions For Learning needs to purchase the scholarship, secure a volunteer mentor and organize a supportive program for the student and parent(s)/guardian(s). Thanks to the generous support of our community donors, students earn a two-year state college tuition scholarship through the Florida Prepaid College Foundation upon successful completion of the program. Volunteer mentors are also recruited, complete and pass a full background check, and are trained to provide support, guidance, and encouragement for the student throughout middle school, high school and beyond. The College Readiness program includes one on one and small group meetings facilitated by College Success Coaches, Career Exploration and College Readiness Workshops, participation in the on-site Champions For Learning College and Career Preparation Program, and many other opportunities.

Students selected for the Take Stock program commit to:

• Stay drug and crime free
• Maintain at least a 2.5 unweighted cumulative GPA and a ‘C’ or above in all courses
• Attend school regularly (No more than 4 absences per quarter)
• Exhibit good behavior in and out of school
• Volunteer and become involved in the community
• Meet weekly with their mentor on school grounds
• Complete program curriculum and yearly benchmarks (this is a program serving your child in eighth through twelfth grades)
• Participate in all program activities, meetings, and events
• Respond to communication from mentor and/or Champions For Learning staff within 24 hours

The program eligibility criteria, participation deadlines, and application are enclosed in this packet. Take Stock in Children is a model that Champions For Learning is very proud of for its record of student accomplishment. With a vision of a community that is 100% engaged in support of student success, Champions For Learning serves a unique role in bringing the community together to create life-changing learning experiences for every student through opportunities such as this. To learn more about the resources we provide, please visit ChampionsForLearning.org.

Sincerely,

Tonya DuBois
Senior Director of Student Programs
Champions For Learning
Become a Take Stock in Children Scholar

Deadline is October 14, 2019

Criteria for Application

To be eligible to apply for the Take Stock in Children program, students must meet the below listed criteria:

- Earning a minimum of a 2.5 GPA
- Have good attendance and behavior
- Be a U.S. Citizen or Permanent Resident Alien
- Have a Social Security number
- Meet the below income eligibility guidelines provided by the USDA

INCOME ELIGIBILITY GUIDELINES

Effective from July 1, 2019 to June 30, 2020

<table>
<thead>
<tr>
<th>HOUSEHOLD SIZE</th>
<th>ANNUALLY</th>
<th>MONTHLY</th>
<th>TWICE PER MONTH</th>
<th>EVERY TWO WEEKS</th>
<th>WEEKLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>23,107</td>
<td>1,926</td>
<td>963</td>
<td>889</td>
<td>445</td>
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<tr>
<td>2</td>
<td>31,284</td>
<td>2,607</td>
<td>1,304</td>
<td>1,204</td>
<td>602</td>
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<td>3</td>
<td>39,461</td>
<td>3,289</td>
<td>1,645</td>
<td>1,518</td>
<td>759</td>
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<tr>
<td>4</td>
<td>47,638</td>
<td>3,970</td>
<td>1,985</td>
<td>1,833</td>
<td>917</td>
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<tr>
<td>5</td>
<td>55,815</td>
<td>4,652</td>
<td>2,326</td>
<td>2,147</td>
<td>1,074</td>
</tr>
<tr>
<td>6</td>
<td>63,992</td>
<td>5,333</td>
<td>2,667</td>
<td>2,462</td>
<td>1,231</td>
</tr>
<tr>
<td>7</td>
<td>72,169</td>
<td>6,015</td>
<td>3,008</td>
<td>2,776</td>
<td>1,388</td>
</tr>
<tr>
<td>8</td>
<td>80,346</td>
<td>6,696</td>
<td>3,348</td>
<td>3,091</td>
<td>1,546</td>
</tr>
<tr>
<td>For each additional family member, add</td>
<td>8,177</td>
<td>682</td>
<td>341</td>
<td>315</td>
<td>158</td>
</tr>
</tbody>
</table>

Reminder: Total income before taxes, social security, health benefits, union dues, or other deductions must be reported.

How to Apply

Complete the written application and submit all documents to your school’s guidance office is the first step to be selected for the Take Stock in Children program. Once submitted, all applications will be reviewed by Champions For Learning staff for completion and assessed by an independent, community-based selection committee to determine a group of semifinalists. Semifinalists will complete an interview and final student selection will be determined by the committee.

Instructions – Application Check List: Incomplete and/or late applications and documents will not be considered.

Complete the application in blue/black ink (NO PENCIL, it is recommended to type answers on a separate sheet). Do NOT submit application in folder, binder, portfolio, etc. Please ONLY paper clip, staple, or binder clip the application and document packet.

1. Complete all sections of the written application
   - Section A: Student Identification Information
   - Section B: Household Information
   - Section C: Employment Information
   - Section D: Financial Information
   - Section E: Student Information
   - Section F: Parent/Guardian Statement
   - Section G: Student Short Answers
   - Section H: Authorization For Information Release Form

2. Include all documents
   - Copy of parent(s)/guardian(s) 2018 Tax Return with student listed as dependent
   - Copy of parent(s)/guardian(s) last two months paystubs or other proof of income
   - Copy of student’s U.S. birth certificate, U.S. passport, certificate of naturalization, or permanent
resident card
   _____ Copy of student’s Social Security Card
   3. _____ Return application and documents packet to the student’s school counselor office by Monday, November 12, 2018

Important Dates
   • October 14, 2019 – Application and documents deadline
   • January 24, 2020 – Semifinalists letters mailed to students
   • Week of February 17, 2020 – Parent(s)/Guardian(s) & Student(s) Interviews
   • February 28, 2020 – Final Take Stock in Children selection letters mailed to students
   • March – Events: Contract Signing, Mentor Meet n’ Greet Workshop, and Induction Ceremony

Become a Take Stock in Children Scholar
   Deadline is October 14, 2019

Take Stock in Children scholarship recipients receive

   • A Scholarship
     A Florida Prepaid College Scholarship, which can be used at any State public university, college, or vocational/technical school in Florida.
   • A Mentor
     A volunteer mentor who will meet with each student at school, with cooperation from the school and parent(s), to assist and encourage students to achieve and reach their full potential.
   • A College Success Coach
     Local Take Stock in Children staff will help design a college success plan and guide each student through middle and high school transition and into College.

   Date application is due back to school’s guidance office: Deadline is October 14, 2019

SCHOLARSHIP APPLICATION

SECTION A: Student Identification Information

Student ID # ___________________________ Date: ______________________________

School ____________________________________________

Student Name ________________________________ Social Security # ________________________________

Grade ___________ Date of Birth ________________ □ Male □ Female

Address ________________________________________ Apt. # __________________

(Street)

City ______________ State ______________ Zip Code ______________

□ Check if Mailing Address is same as home address listed above. If not, enter Mailing Address below:

Mailing Address ________________________________________ Apt. # __________________

(Street)

City ______________ State ______________ Zip Code ______________

Student Phone: ___________________________ Parent Phone #: ___________________________

Student E-mail: ___________________________ Parent E-mail: ___________________________
SECTION B: Household Information

Parent/Guardian (1) ____________________________________________ Social Security # ____________________________ 
(Last, First, MI)
Date of Birth ___________________________ Last Grade Completed in School ____________________________

Parent/Guardian (2) ____________________________________________ Social Security # ____________________________ 
(Last, First, MI)
Date of Birth ___________________________ Last Grade Completed in School ____________________________

Applicant lives with: □ Mother  □ Stepmother  □ Grandmother  □ Guardian
□ Father  □ Stepfather  □ Grandfather  □ Ward of Court  □ Other_____________________

Number of brothers _______________________ Number of sisters _______________________

Please list all persons living in the home other than student/applicant

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Relationship</th>
<th>Highest Level of Education Completed</th>
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Independent siblings living outside the home:
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<tr>
<th>Brother/Sister Name</th>
<th>Currently</th>
<th>Last</th>
<th>Age</th>
<th>(check one)</th>
<th>Attending School</th>
<th>Grade Completed</th>
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**SECTION C: Employment Information**

**Parent/Guardian**

Name of Parent/Guardian(1): __________________________________________

Employer: __________________________________________________________

**Occupation**

Address of Employer: ________________________________________________

(street, city, zip)

Number of years with Current Employer: ____________________________

Gross Monthly Salary: ____________________________

(before taxes and deductions)

**Parent/Guardian’s Current Employer**

Name of Parent/Guardian(2): _________________________________________

Employer: __________________________________________________________

**Occupation**

Address of Employer: ________________________________________________

(street, city, zip)

Number of years with Current Employer: ____________________________

Gross Monthly Salary: ____________________________

(bare taxes and deductions)

**SECTION D: Financial Information**

What is your household income? $ __________________________

Are you eligible to receive any social service? (Food stamps, Medicaid, etc.) □ Yes □ No

Please check the services you currently receive: □ Welfare □ Food Stamps □ Medicaid
Are you currently receiving assistance from your local welfare/department? □ Yes □ No

Do you receive income from any other source for this student/applicant? (Social Security, child support, etc.)
□ Yes □ No

If Yes, please list type of support and amount per month:


Do you or the student/applicant have a savings account? □ Yes □ No

Approximate balance: $__________________________

Do you own your own home? □ Yes □ No

If yes, what is amount of your monthly payment? $______________

If yes, how much is your house cost? $______________

Do you rent? □ Yes □ No

If yes, what is amount of your monthly payment? $______________

How long have you been able to live? ________________________

Please attach copy of 2018 tax return with student listed as dependent (or other proof of income eligibility if taxes were not filed) and a copy of pay stubs for the most recent month worked.
SECTION E: Student Information (To be completed by student) –
*If needed, please use a separate sheet of paper to answer the following questions.*

List activities, interests, strengths, hobbies or awards you have received (church, school, community, work experience, etc.)

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Student Statement

Please tell us about your goals, aspirations and hopes for your future

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________
SECTION F: Parent/Guardian Statement (To be completed by parent(s)/guardian(s))

*If needed, please use a separate sheet of paper to answer the following questions.*

APART from financial considerations, how could this program benefit your child? Please include your goals, aspirations and hopes for your child's future.
Please list all special family situations that might be relevant to school success (serious illness in the family, loss of employment, HRS involvement, homelessness, etc.).

Factors are used to determine student eligibility, please check all that apply:
☐ Student attends low-performing school
☐ Single parent
☐ Incarcerated parent
☐ Deceased parent
☐ Absent parent (no contact or support)
☐ Poor relations between biological parents
☐ DCF involvement
☐ Extended family in home
☐ Extended family raising student
☐ Student applicant is teen parent
☐ Parent was teen parent
☐ Family has received TANF benefits within last year
☐ First generation college student (Parents have not completed education beyond High School)
☐ Student is first in the family to complete high school
☐ Migrant worker
☐ English not spoken in home
☐ Loss of employment
☐ Home in foreclosure
☐ Homeless or living with extended family or friends
☐ Serious illness in household
☐ Disabled student or family member
☐ Student is or has been in foster care
☐ Other (please specify):
I understand that the information contained in this application is accurate and will be managed and shared with the Local Lead Agency (Champions For Learning) selection committee and the implementers of the program. I also certify that my child meets the program income requirements. I understand that any false information in this application may result in my child losing his or her eligibility in the program.

__________________________________________  ______________________________________
Student Signature                           Parent/Guardian Signature

For Official Use only:
☐ Application reviewed by TSC staff  ☐ Eligible for TSIC  ☐ Not eligible for TSIC
☐ Ineligibility confirmed by TSC staff

__________________________________________  ________________________________  _____________
Staff Signature                             Staff Title                        Date

<Submission of this application does not guarantee scholarship award>
SECTION G: Student Short Answers (To be completed by student)
(This section of the application should be completed by the student, be honest in your responses and fully answer all questions. Tell your story and talk about yourself. It is okay to boast about yourself in this section.)

*We recommend that you use a separate sheet of paper to answer the following questions.*

1. What is your favorite subject and why?

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

2. What would you look for in a mentor? (A mentor is someone that will help you and who will provide you with guidance while in school. They are an experienced and trusted person. They will work one on one with you for the next 4 years if selected. They will meet with you during your school lunch hour and will help you achieve your goals.)

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

3. How are you giving back to the community or how will you give back in the future? (i.e. in high school, college, etc.)

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

4. Tell us about an individual that you admire in your life. What makes them admirable?

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

5. In two or more sentences, please tell us what sets you apart from the other applicants and why should you be selected for the Take Stock in Children Program?

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________________
SECTION H: Authorization For Information Release Form
(The school guidance department will provide a copy of your student’s grades, attendance, and behavior records.)

AUTHORIZATION FOR INFORMATION RELEASE FORM

I, the undersigned parent or legal guardian of ___________________________________________ hereby grant, (Student Applicant’s Name) authorize and consent to allow Take Stock in Children and Champions For Learning or the designees, including without limitation teachers, mentors and donors, to have access to the cumulative folder and discipline record of the minor child named above. This information includes, but is not limited to, the current and past GPA, test scores, attendance and discipline records on the minor. I hereby release, discharge and agree to hold harmless Take Stock in Children and any mentor, representative and employee from any liability by virtue of any use whatsoever of said information contained in the cumulative folder and discipline record. I understand that this release is valid for the application period and if selected, the length of the time that the minor child remains in the Take Stock in Children program.

Date: __________________________________________

Name of Student Applicant ________________________________________________

Name of Parent/Guardian ________________________________________________

Parent/Guardian Signature ______________________________________________

Address ________________________________________________________________

                      Street, Apt #        City, Zip

Parent/Guardian Email ____________________________________________________

Parent/Guardian Phone # ________________________________________________
PARENT/GUARDIAN CONSENT FOR RELEASE OF EDUCATIONAL INFORMATION

In accordance with the Federal Educational Rights and Privacy Act ("FERPA"), and related state law as set forth in FS §1002.22 and FS §1002.221, I hereby consent to the release of my child’s educational records, including reports, test scores, and related information, to the program staff at Champions for Learning to assist with monitoring my child’s academic progress in order to help identify any areas of academic need for my child so that it can provide appropriate enrichment programs as needed.

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>School</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Student ID Number</th>
<th>Grade</th>
</tr>
</thead>
</table>

Parent/Guardian Name:

Signature of Parent/Guardian: __________________________ DATE ____________