

## 2025-2026 Academic School Year PA Tax Credit Scholarship Application

☐ My child is currently attending scl	hool in Pennsylvania AND	☐ I earn less than <b>\$108,444.00</b> a	nnually*	
Has the child you are applying for re	eceived funding from Best of t	he Batch before? (Circle one)	yes no	
Scholarship you are applying for (ch	noose one):□EITC □ OST	C ☐ Pre-K (Fill out ONE ap	oplication <u>per child</u> )	
STUDENT INFORMATION				
Last Name	First Name	M.I Nickn	ame	
Date of Birth/	Gender: ○ Male ○ F	emale Other		
Address: Street				
City	State Zip _	County		
STUDENT SCHOOL INFORMAT	TION			
Current School Attending:		□ Public School	□ Non-Public School	
School District you reside in:		_		
If your child didn't attend private scl	hool, what public school woul	d they attend?		
Current GPA (if applicable):		Grade entering September 2025:		
School you plan to attend with poten	ntial Best of the Batch scholars	ship:		
Annual Tuition (include all required	fees):	-		
PARENT / GUARDIAN INFORM	IATION			
1st Parent / Guardian's Name:		Relationship:		
2 <sup>nd</sup> Parent / Guardian's Name:		Relationship:		
Address: Street				
City	State Z	Zip County		
1st Email Address:	2 <sup>nd</sup> E	mail Address:		
Home Phone	Work	Cell		
Number of people living in my/our h	nousehold in 2024 (include yo	urself): Adults: Children	1:	
Current marital status of 1st Parent /	Guardian: (check one)			
☐ Single ☐ I	Married Divorced	☐ Divorced / Remarried	□Widowed	
☐ Separated (Mo/Yr.)	☐ Other:			

## \*HOUSEHOLD INCOME INFORMATION

To be eligible for a scholarship, your annual household income (including income from all persons living in the household and any child support, alimony, public assistance, Supplemental Income including SSI, Disability Income, Social Security benefits or pensions) must not exceed \$108,444.0 plus an additional \$19,088 per household dependent. With this application, you must submit a copy of your Federal Income Tax Return (IRS Form 1040, 1040A, or 1040EZ) for the year 2024 with copies of all W-2 Forms and documentation of all other income sources. Any parent or guardian who claims the student as a dependent must report income on this form and attach the necessary documentation.

<b>Income Sources</b>								
Gross Income reported on 2024 Federal 1040 Forms:								
1st Parent / Guardian	2 <sup>nd</sup> Parent / Guard	lian Total l	Household Incom	e				
\$	\$	\$	·					
<b>Did you complete the FAFSA Form online?</b> □ Yes □ No								
STATEMENT QUE	STION							
In 500 words or less please answer the following question on a separate sheet of paper.  What do you believe is the parental role in supporting your child's education, and what steps do you take to fulfill that?								
VERIFICATION SI	GNATURE							
I certify that all of the included information is true and correct, all income is reported and the income documents enclosed provide a true and accurate verification of my annual household income. I understand that the deliberate misrepresentation of the information may result in the scholarship being denied or terminated, and may subject me to prosecution under State and Federal laws. I understand that the grant payments will continue for one year only as long as my child is enrolled at the school, my family continues to qualify under the scholarship income guidelines, and I stay current on the tuition balance. Any unused portion of the scholarship award, for whatever reason, must be refunded to Best of the Batch Foundation. Further, I understand that the scholarships are awarded according to the prioritized selection of the qualified applicants, as per the guidelines, and that the grant awards are the sole responsibility of Best of the Batch Foundation, and all decisions are final. I agree to have my child's past and current progress reports released by the school to Best of the Batch Foundation for program evaluation. I give my permission to Best of the Batch Foundation to release the name of my child for media purposes if he or she is awarded a scholarship. I agree to release Best of the Batch Foundation, and its Board of Officers and Directors and employees or partners, from any liability in its efforts to provide 1-year educational grants which are renewable annually at the sole discretion of Best of the Batch Foundation.								
Signature of 1 <sup>st</sup> Paren	t / Guardian	Social	Security #	Date				
Signature of 2 <sup>nd</sup> Parer	nt / Guardian	Social	Security #	Date				
OFFICE USE ONLY								
Date Received: Complete: Yes No By:								
Score #1	Score #2	Score #3	Score #4	Score #5				

## **CHECKLIST**

Every year, applications are rejected because they are incomplete. Do not let that happen to you! Use this checklist to make sure your application includes all required materials.

## This application is complete and valid only when all of the following materials have been received:

Completed	applic	ation	form,	with all	questions	answered,	and <b>signed</b>	at the bott	om.

- □ **Statement Essay Question** on a separate sheet of paper.
- □ A copy of your **2024 Federal Income Tax Return** (Form 1040, 1040A, or 1040EZ)
- □ A copy of all **W-2 forms** for 2024
- □ Copies of any **other proofs of income**, as needed.
- □ Copy of **two forms of identification** listing the primary address. Acceptable forms of identification are:
  - o Driver's License
  - o ID Card
  - o Utility Bill
  - o Lease
  - o Pay Stub
  - o Mortgage Statement
  - Local Tax Bill

Please enclose your completed application along with all documentation requested.

\*Incomplete applications will not be reviewed.\*

Mail or drop off applications to:

Best of the Batch Foundation
Attn.: PA Educational Improvement Tax Credit Scholarship Application
2000 West Street
Munhall, PA 15120

Completed applications, including all documentation, must be received or post-marked to our office by Friday, April 11, 2025 by 4:00 p.m.