

PATHWAY I Early Learning Scholarship Application Instructions

INFORMATION ABOUT THE PROGRAM -

This application is to be used to apply for the Pathway I - Early Learning Scholarships. This program provides scholarships to help families pay for child care/early education program to help their children get ready for school. Scholarships are paid directly to the child care/early education program providers chosen by the parent.

Scholarship funds may be used to cover the cost of attendance to a child care/early education program, increase the length time your child receives services, enhance the services your child receives, cover parent fees, rates or other charges not covered by other public funding like the Minnesota Child Care Assistance Program (CCAP), Head Start or School Readiness.

Maximum scholarship amounts may vary based on the child care/early education program's quality as measured by Parent Aware ratings. Families that receive a Pathway I - Early Learning Scholarship and choose a child care/early education program with a:

- Three or Four Star Parent Aware program will be eligible to receive up to \$5,000;
- One or Two Star Parent Aware program will be eligible to receive up to \$4,000; or
- A signed Parent Aware Participation Agreement but does not yet have a rating are eligible to receive up to \$3,000.

Information about Parent Aware can be found at http://www.parentawareratings.org.

TO QUALIFY FOR A PATHWAY I - EARLY LEARNING SCHOLARSHIP, YOUR FAMILY MUST MEET THE FOLLOWING REQUIREMENTS:

1) You must live in one of these counties in Minnesota:

Anoka	Chippewa	Lyon	Olmsted	Stearns
Becker	Crow Wing	Mahnomen	Ottertail	Swift
Beltrami	Dakota	Meeker	Pine	Wadena
Benton	Douglas	Mille Lacs	Polk	Washington
Blue Earth	Hennepin	Morrison	Ramsey	Watonwan
Brown	Isanti	Mower	Red Lake	Winona
Carlton	Itasca	Nicollet	Rice	Wright
Cass	Kandiyohi	Nobles	Saint Louis	Yellow Medicine
Clearwater	Lincoln	Norman	Scott	

2) Your family must have an income equal to or less than 185 percent of federal poverty level income in the current calendar year. The chart below is a guide that is based on FY2013 poverty guidelines published in Federal Register on January 2013:

Family Size	Gross Income	Family Size	Gross Income
2	\$28,693.50	6	\$58,441.50
3	\$36.130.50	7	\$65,878.50
4	\$43,567.50	8	\$73,315.50
5	\$51,004.00	9*	\$77,335.50

For family units of more than eight members, add \$4,020 for each *additional* member.

*See Family Size of 9 as an example.

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Or: be able to document your child's current participation in one of the follow programs:

- Free and Reduced-Price Lunch Program #
- Child and Adult Care Food Program (CACFP)#
- Food Distribution Program on Indian reservations#
- Head Start #
- Minnesota Family Investment Program (MFIP)#
- Child Care Assistance Programs (CCAP)#
- Supplemental Nutrition Assistance Program (SNAP)#
- Placement in foster care under section 260C.212#
- 3) Your family must meet the following eligibility requirements:
 - a. Families must have a child who is age three or four as of September 1 of the current year and not yet eligible for kindergarten; or
 - b. A child between the ages of zero and five of a parent under the age of 21 who is pursuing a high school or general education equivalency diploma is eligible for a scholarship if the parent meets the income eligibility guidelines; or
 - c. A sibling between the ages zero-to-five years old of a child who has been awarded a scholarship attending the same child care/early education program.

Definition of *sibling* means one or more individuals who have one or both parents in common through blood, marriage or adoption, including siblings as defined by the child's tribal code or custom.

HOW TO COMPLETE THE APPLICATION:

- 1) Answer all questions on the application form.
- 2) Attach the required written proof of:
 - a. Public Assistance or Publicly Funded program participation OR income documentation. You can also complete the *Verification Form*, if applicable.
 - b. High school or general education equivalency diploma (showing participation) if you are under 21 and requesting a scholarship for a child ages zero through age five.
- 3) Carefully read the Agreement and Consent form (agreement to comply, consent to release information, and to participate in the evaluation). Initial, sign and date the scholarship application.
- 4) Carefully read the Tennessen Warning.

5) **Mail or bring** the completed application form including all other *required* documents to the regional administrator at the scholarship location identified. Applications that are faxed or emailed will be **not** be considered for a scholarship.

Region	Scholarship Office Location	Contact Info
11 - Anoka, Dakota,	Think Small	651-641-6604
Hennepin, Ramsey, Scott,	10 Yorkton Court	855-898-4465
and Washington counties	St Paul MN 55117	
3 - Carlton, Itasca, and St	Think Small	651-641-6604
Louis counties	10 Yorkton Court	855-898-4465
	St Paul MN 55117	

- 6) What happens next? The regional administrator will send you a letter to let you know if your child or children qualify for a Pathway I Early Learning Scholarship.
- 7) **Questions/need assistance?** The regional administrator will work closely with and assist parents. If you have questions, contact the regional administrator at the office listed above.

EARLY LEARNING SCHOLARSHIP APPLICATION CONTENTS

SECTION I - APPLICANT INFORMATION

This section collects parent/family information, household size and number of family members and children (including siblings).

SECTION II - INCOME VERIFICATION

This section serves to gather and verify income. Supporting documentation (proof of income) is required. You must provide proof of participation (showing participation) in a public assistance or publicly funded program OR you can provide income documentation. If you do not have documentation, see **Verification Form** (Attachment A).

SECTION III - CHILD CARE/EARLY EDUCATION PROGRAM CHOICE

This section asks the parent to identify the child care/early education program at which the parent would like to use the scholarship. You must provide the name, address and phone number of the programs of your choice, in order of priority.

SECTION IV - AGREEMENT AND CONSENT

This document provides important details and an overview of the scholarship program requirements for applicants to participate in the scholarship program and evaluation. There are areas where your initials, signature and date are required.

SECTION IV - TENNESSEN WARNING

This notice is regarding the request for information and private data.

FRIENDLY REMINDER AND CHECK LIST

This is a quick point of reference to remind you of the required documentation and to make sure to supply all the necessary information with your Pathway I Scholarship application.

VERIFICATION FORM (Attachment A)

The Verification Form is to be completed only if the applicant does not have evidence of participation in one of the public assistance or publicly funded programs (see Section II, option #1 of the Pathway I Scholarship application).

This verification form has two sections to fill out and sign. The top section is for the parent to complete. The parent then gives the form to their agency worker to complete the second half. The agency worker returns the completed and signed form to the parent who must attach it to the Pathway I - Scholarship application.

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The top part of the application is to be completed only by the regional administrator's office.

For the "Child Care/ Early Education Program Type" this includes, but is not limited to, Head Start, school-based, or Child Care Assistance Program (CCAP).

SECTIONS I-IV must be completed by the Parent or Legal Guardian

The application is to be used to apply for the Pathway I - Early Learning Scholarships.

All required information on the application is marked with an asterisk (*) in order to determine eligibility. All other information is optional or useful in the program's evaluation.

Please continue to refer to the *INSTRUCTIONS* document for assistance and guidance when completing the application form. If you need assistance, please ask your regional administrator.

SECTION I – APPLICANT INFORMATION (page two)

Special Services – Indicate if you need an interpreter, the preferred spoken language in your home and how you heard about the Pathway I - Early Learning Scholarship. This information is optional.

Parent /Legal Guardian – Provide accurate information of the party representing the child or children. This can be a parent or legal guardian (i.e. grand parent, foster care parent, someone with legal authority, etc.). All required information is marked with an asterisk (*) in order to determine eligibility.

For entering information in the "Employment Status" indicate if you work full time (FT) this means > 25 hours per week; part time (PT) means < 25 hours per week; if you are Unemployed, Seeking Employment (UE) or Unemployed, Not Seeking Employment (NSE).

Family Size – Complete this information by identifying the number of family members in your current household (including any siblings).

Definition of *sibling* means one or more individuals who have one or both parents in common through blood, marriage or adoption, including siblings as defined by the child's tribal code or custom.

Parents under 21 – If you are a parent *under* age 21, pursuing a high school or general education equivalency diploma, and you are requesting a scholarship for a child ages zero through age five, then you must provide written proof that you are pursuing a high school or general education equivalency diploma.

Definition of *written proof* means a copy of the official letter from the organization (on their letterhead) in which you are currently enrolled and actively participating in classes.

Child Information – Provide the required identifying information for each child to be considered for a scholarship: first, middle and last name; birth date; and gender.

The *Ethnicity and Race* identity is *optional* and intended only for evaluation of the program. This information will not be used to determine eligibility. If you choose to enter the ethnicity and/or race of the eligible children in your household, who are between the ages of three and five and not yet eligible for kindergarten, do so in the area on page four of the application.

Choose one ethnicity and enter	Choose one or more races and enter it	
it next to each child on the list:	next to each child on the list:	
☐ Hispanic/Latino	□ Asian	
□ Not Hispanic/Latino	American Indian or Alaskan	
	Native	
	 Black or African American 	
	 Native Hawaiian or other Pacific 	
	Islander	
	□ White	

SECTION II - INCOME VERIFICATION (page four of application)

You have two options for verifying your income. You only need to choose one of the two options to apply.

Option 1: Provide proof that your child is currently participating in a publicly funded program.

If your child is currently participating in any of the public programs listed, attach written documentation showing participation in ONE of the programs. If you do not have written documentation showing participation, please complete the **Verification Form** (Attachment A) included.

Note: If your child/children are *not* currently participating in any of the listed publicly funded programs but they are on a waiting list at Head Start, school-based or CCAP please indicate that in the area on page five of the application.

Option 2: Record your income in the area provided and attach proof of this income. Note: Only complete the Option 2 section if you have NOT selected Option 1 to verify income eligibility.

Fill in the INCOME table. List all sources of income for each member of your household (including yourself, another parent or legal guardian). All sources require proof of income (evidence).

Source of Income includes, but is not limited to:

- Gross wages and/or salary from all jobs (gross means before any deductions)
- Pension, SSI, retirement, Social Security
- Public assistance, child support, alimony
- Unemployment, worker's comp, strike benefits
- Other income including: tips, tax refund, 1099, Farm/Self Employment (net amount only, this means *after* deductions)

Amount Received from all sources of income

Rate of Occurrence:

- Weekly
- Every two weeks
- Twice per month
- Once per month

Proof of Income:

Attach proof of all income for each member listed in the INCOME table. Proof of income may include:

- a recent tax form;
- W-2 form;
- two (2) most recent pay stubs;
- financial aid statement; or
- a statement from your employer (on company letterhead).

SECTION III - CHILD CARE/ EARLY EDUCATION PROGRAM CHOICE (page six of application)

You may use your Pathway I - Early Learning Scholarship at any eligible program in Minnesota. A program is eligible to receive a scholarship if they are participating in the Parent Aware, Minnesota's Quality Rating and Improvement System. Parent Aware is a rating tool for selecting high quality child care and early education. For more information about Parent Aware, go to www.parentawareratings.org.

Programs are eligible to receive a certain amount of scholarships per child based on where they are in the Parent Aware process. The chart below shows the scholarship amount based on the rating level:

Program rating level	Scholarship amount per child
Three or Four Star Parent Aware rating	Up to \$5,000 per child
One or Two Star Parent Aware rating	Up to \$4,000 per child
Signed up for Parent Aware but haven't received a rating.	Up to \$3,000 per child

1. Where would you want to use your scholarship, if you are awarded?

You may enter information for four (4) different child care/early education programs, in order of priority, in the chart or if you need assistance the scholarship regional administrator will help you find a child care/early education program eligible to receive a scholarship. If your child is currently attending a program but you would like to explore other options, they can assist you with this as well.

Note: Your child must be enrolled in an eligible program within 10 months of being awarded a scholarship, or the scholarship will cancel and you will have to reapply in order to be eligible for another scholarship.

SECTION IV - AGREEMENT AND CONSENT (page six of application)

As a parent or legal guardian, you must read the agreement and consent form, initial, sign and date as appropriate. This form must be completed and turned in as part of the scholarship application.

SECTION V - TENNESSEN WARNING (page eight of application) Minnesota Department of Education, Early Learning Scholarships Program

What information are we requesting?

We are requesting all information on the Pathway I - Early Learning Scholarships program application. This application requests information that may be considered private data under Minnesota law.

Why do we ask you for this information?

Information on this application is required to apply for the Pathway I - Early Learning Scholarships program. We will use the information collected via this application or any additional communications related to this application to determine eligibility for the Pathway I - Early Learning Scholarships program. This information is also necessary to comply with the state law authorizing the Early Learning Scholarships program.

Am I required to provide this data?

There is no legal obligation for you to provide the data requested. However, absent the data requested, the Minnesota Department of Education (MDE) will not be able to evaluate your child's eligibility for the Pathway I - Early Learning Scholarships program.

Who else may see this information?

A third-party entity will evaluate the effectiveness of the Early Learning Scholarships program for the Minnesota Department of Education. That entity is bound by Minnesota's data practices and privacy laws and may not share your data with any other private entities but will share its evaluation with MDE. We may also give the data you've provided to the legislative auditor, the Minnesota Department of Human Services and any law enforcement agency or other agency with the legal authority to access the information, and anyone authorized by a court order.

How else may this information be used?

We can use or release this information only as stated in this notice unless you give us your written permission to release the information for another purpose or to release it to another individual or entity. The information may also be used for another purpose should the United States Congress or the Minnesota Legislature pass a law allowing or requiring us to release the information or to use it for another purpose.

How long will my data be kept?

Your data will be maintained for a minimum of seven years.

FRIENDLY REMINDER CHECK LIST

То	ensure a smooth process, please be sure to:
	READ and follow the directions carefully.
	☐ Complete all areas of the scholarship application (as applicable).
	Provide all the required supporting documentation, proof of education activity and income information.
	☐ Make sure you have the Verification Form (Attachment A) completed by you and the agency worker (if applicable). This form must be sent in with your scholarship application if you do not have proof of income (see Section II).
	☐ Staple all supporting documentation to the back of the scholarship application.
	☐ Sign and date the scholarship application in the areas as requested/required.
	□ Double check your scholarship application. If there are missing items this may cause a delay in the application approval process and may hinder your application from getting awarded.
	Call the regional scholarship administrator in your area (see page three of instructions) if you have questions, or you may go to MDE's website for more information: ####http://education.state.mn.us/MDE/StuSuc/EarlyLearn/EarlyLearnScholarProg/index.html
	☐ Keep a copy of the scholarship application and attachments for your own records (before submitting).
	☐ Mail or drop off your scholarship application to the local regional administrator's scholarship office (page three of instructions).
	Helpful tip: getting a tracking number from the post office or delivery service if you are mailing your scholarship application helps to ensure it was delivered to and/or received by the regional administrator's scholarship office.

VERIFICATION FORM - Attachment A

This form has two sections and must be completed by the parent and agency worker.

As required in Section II - Income Verification, option #1 of the scholarship application, this form is to be used for the purpose of verification for families of children that are applying for a Pathway I - Early Learning Scholarship but do not have proof of participation for one of the public assistance or publicly funded programs listed. Children who are currently participating in a public assistance or publicly funded program may also be eligible for a Pathway I - Early Learning Scholarship.

Use the attached VERIFICATION FORM on the next page and be sure to submit it with your scholarship application, if applicable.



PATHWAY I - EARLY LEARNING SCHOLARSHIPS VERIFICATION FORM Attachment A

Note: This verification form has two sections and must be completed by the parent and agency worker. As required in Pathway I - Early Learning Scholarship Program application (Section II – Income Verification, Option #1) states you may use this form for the purpose of verification of families of children that are applying for a scholarship but do not have proof of participation for one of the public assistance or publicly funded programs listed below. Children who are currently participating in a public program may also be eligible for an Early Learning Scholarship.

1.	This section is to be completed by the PARENT(S)/LEGAL GUARDIAN: I, (name of parent/legal guardian) am applying for a Pathway I - Early Learning Scholarship for				
	(flame of parenthegal guardian) and applying for a Fathway 1 - Early Learning Scholarship for (Enter name of child or children) By signing below, I give my consent for the public assistance or publicly				
	funded program at to release information to the Regional Scholarship Administrator about my participation in				
	one of the programs identified in section 2.				
	Parent/Legal Guardian Signature Date				
2.	This section is to be completed by the public assistance or publicly funded program / AGENCY WORKER (from the agency identified above). This form must be RETURNED to the PARENT/LEGAL GUARDIAN for submission with Pathway I - Early Learning Scholarship Program application. Public Assistance or Publicly Funded Programs - The child or children listed above are currently participating in at least ONE of the following public programs. Please check the line of the public program or programs for which you are aware that the child is currently participating: Minnesota Family Investment Program (MFIP) Child Care Assistance Program (CCAP) Head Start Food Support (SNAP) Free and Reduced-Price Lunch Program Foster Care Child and Adult Care Food Program (CACFP) Food Distribution Program on Indian reservations (Automatically qualifies for FRLP) Day Care Center Child/ Children Eligible for Free (A) or Reduced (B) meal reimbursement Family Day Care Home Family Income Eligible Tier I (Sponsoring Organization to Verify) Is this family income eligible based on the 2013 federal poverty level equal to or less than 185 percent? Yes No Confirm Income Amount: \$				
	Public Assistance or Publicly Funded Programs Information –				
	Agency Worker:Worker Email:				
	Agency Name: Agency Address:				
	City/State/Zip Code:				
	As the identified and authorized public assistance or publicly funded program worker, I certify (promise) that the information provided to Early Learning Scholarship regional administrator, and/or on this form, is true. Signature required:/				