



# DOWNTOWN BALTIMORE CHILD CARE, Inc.

237 N. Arch Street, Baltimore, MD 21201-1526 • 410-659-0515 • Fax 410-659-0685

A Non-Profit Organization

[www.dbcckids.org](http://www.dbcckids.org)

## DBCC Scholarship Procedure

**When applying for DBCC's financial aid, please use the following procedures:**

### **First Application:**

1. Fill out both sides of the enclosed DBCC Financial Aid Form, sign, and return to the DBCC office.
2. The following documentation must accompany the completed Financial aid application:
  - The most recent federal income tax return, form 1040, 1040A, 1040EZ or telefile documentation.
3. Income guidelines for scholarship eligibility:

Income guidelines will be based on the adjusted gross income as noted on federal tax returns.

<u>Income Range</u>		<u>Award Eligibility</u>
10,000 - 50,000	up to	50%
50,000 – 60,000	up to	40%
60,000 – 70,000	up to	25%
70,000 – 75,000	up to	10%

4. Awards will be made on a first come first serve, rolling basis until the scholarship funds are used for the current year.

### **Renewal Applications:**

1. Submit most recent Federal income tax return, form 1040, 1040A, 1040EZ, or TeleFile documentation along with the most recent W-2.



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**Application for Financial Aid**

This information will be considered strictly confidential. It will not be made available to any individual or group, not directly involved with the granting of financial assistance by Downtown Baltimore Child Care, Inc.

**Child's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

City State, Zip: \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

Parent's Address: \_\_\_\_\_

Parent's Occupation: \_\_\_\_\_

Name & Address of Employer: \_\_\_\_\_

\_\_\_\_\_

Annual Gross Income: \_\_\_\_\_

**Co-parent's Name:** \_\_\_\_\_

Co-Parent's Address: \_\_\_\_\_

Co-Parent's Occupation: \_\_\_\_\_

Name & Address of Employer: \_\_\_\_\_

\_\_\_\_\_

Annual Gross income: \_\_\_\_\_

**Other Dependent Children:**

Name	Age	School	Current Tuition or Child Care Fee
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_

**Please list any other dependents:**

\_\_\_\_\_

**Are there any other funds that may be available to support the child's education, such as child support, employer sponsored scholarships, or aid from relatives, friends organizations of agencies?**

\_\_\_\_\_

Signed: \_\_\_\_\_ (Parent) Date: \_\_\_\_\_

Signed: \_\_\_\_\_ (Co-Parent) Date: \_\_\_\_\_