

**Cleveland and EdChoice Scholarship Programs**  
**How to Complete the Income Verification Process**

1. Obtain the Income Verification Form on our website at: <http://education.ohio.gov/edchoice> or <http://education.ohio.gov/clevelandscholarship> or the nonpublic school where you have applied for or renewed a scholarship. (Page 1 and 2 of this document).
2. Complete the parent/guardian information on page 1, filling in all lines. This should be the same information you have provided on the scholarship application/renewal form.
3. List household members (i.e. spouse, children) on page 1 and provide all of the information requested.
4. Write your sources of income on page 2 and provide copies of acceptable, supporting documentation.
5. Sign at the bottom of page 2. Do not return page 3.
6. Based on your household, determine from the list below which one fits your status. For example: If your status is (a) of the choices below, you only have to submit the documents for that option, not all of them.
  - a) If you are currently employed (and have the same job you had all of last year) send either 4 current pay stubs for each job, your W-2's, your 2019 Federal tax forms or your 2019 Federal tax transcripts (can obtain either online at [WWW.IRS.GOV](http://WWW.IRS.GOV) or by mailing the 4506-T form to the IRS).
  - b) If you are currently employed (but did not work your current job for all of last year) send 4 current pay stubs for each job.
  - c) If you are self-employed: Send a copy of your 2019 Federal income tax forms, including all Schedules or 2019 Federal tax transcript.
  - d) If you receive other income sources: (eg., food stamps/OWF, child support, unemployment, Social Security, etc.): Send copies of official documentation that shows how much you receive from each one. Example: If you currently work and receive food stamps and child support, you need to send in four current pay stubs, official documentation that shows how much you receive in food stamps, and official documentation that shows how much you receive in child support.
  - e) If you have no income or you do not have pay stubs or W-2's: Provide your 2019 federal tax transcript from the IRS. ([WWW.IRS.GOV](http://WWW.IRS.GOV)). Please mail the request form to the IRS and once you receive your transcript please mail that form to our office with the Income Verification form.

DO NOT send original documents. Make copies (ex. W-2, check stubs, etc.) to send to our office and block the first 5 digits of all Social Security numbers on all documents only leaving the last 4 digits to be seen. Submit only one (1) form per family. (Ex. A family with 3 students in the program only needs to send the form one time per school year). Keep a copy for your records.

Mail the Income Verification form and supporting income documentation to the Ohio Department of Education, Scholarship Program Office 25 S. Front Street, Mail Stop 309, Columbus, Ohio 43215 by the April 15, 2020 priority deadline.

The parent is responsible for mailing in the Income Verification documents. The private school is not responsible.

Contact Scholarship Program at 614-728-2743, or by email at [Edchoice@education.ohio.gov](mailto:Edchoice@education.ohio.gov) or [Cleveland.scholarship@education.ohio.gov](mailto:Cleveland.scholarship@education.ohio.gov), if you have any questions.

## SCHOLARSHIP PROGRAM 2020-2021 INCOME VERIFICATION FORM

Income Verification is one step in the scholarship application process. Your child must also be enrolled at a participating school. The Income Verification Process is important for some families to determine if they meet low income requirements of the scholarship program. If you are a new applicant of the Scholarship and you qualify for low income status, you will not have to pay tuition above the amount of the scholarship. If you are a new or renewal applicant of the EdChoice Scholarship, you must complete the income process every year to receive a scholarship award.

Helpful tools can be found on the scholarship website at: <http://edchoice.education.ohio.gov> or <http://cstp.education.ohio.gov> If you have more than one child applying for a scholarship, only one income verification form is needed. The scholarship office is not able to return original documents to you; please send only copies. This form and copies of income documents must be mailed to the address below ON BACK OF THIS FORM by the priority application period deadline, April 15, 2020:

**#1**

**PRIMARY PARENT**

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ GENDER: F  M  LAST FOUR DIGIT SS#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ OHIO ZIP CODE: \_\_\_\_\_ RECEIVES INCOME: Y  N

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Name of Private school where your child is enrolled \_\_\_\_\_

**LIST ALL MEMBERS OF YOUR HOUSEHOLD** – Including scholarship students, make a copy of this page if more space is needed.

**#2**

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ GENDER: F  M  LAST FOUR DIGIT SS#: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

SCHOLARSHIP STATUS (CHECK ONE): NEW:  RENEWAL:  NA:  RECEIVES INCOME: Y  N

**#3**

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ GENDER: F  M  LAST FOUR DIGIT SS#: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

SCHOLARSHIP STATUS (CHECK ONE): NEW:  RENEWAL:  NA:  RECEIVES INCOME: Y  N

**#4**

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ GENDER: F  M  LAST FOUR DIGIT SS#: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

SCHOLARSHIP STATUS (CHECK ONE): NEW:  RENEWAL:  NA:  RECEIVES INCOME: Y  N

**#5**

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ GENDER: F  M  LAST FOUR DIGIT SS#: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

SCHOLARSHIP STATUS (CHECK ONE): NEW:  RENEWAL:  NA:  RECEIVES INCOME: Y  N

**EdChoice & Cleveland Scholarship Program  
2020-2021 Income Verification Form**

2020 FEDERAL POVERTY GUIDELINES  
Source: Office of the Asst. Sec. for Planning & Eval/US Dept. of HHS.

EdChoice families qualify for low income status if income is at or below 200% of the Federal Poverty Guidelines. This chart will help you determine if you may qualify.

Income status determines priority for awarding scholarships. It also determines if your family will be responsible for paying any tuition that is not covered by the scholarship.

Based on the number of people in your household, if your gross annual income is the amount listed on the chart or less, you may qualify for low income status.

Household size is determined by the following: the scholarship student, the birth mother or the legal guardian of the scholarship student, the spouse (also includes birth father of any child in the household), all children under the age of 18 which the legal guardian or spouse also has legal custody.

| Number in Household             | Gross Annual Amount (200%) |
|---------------------------------|----------------------------|
| 1                               | \$25,520                   |
| 2                               | \$34,480                   |
| 3                               | \$43,440                   |
| 4                               | \$52,400                   |
| 5                               | \$61,360                   |
| 6                               | \$70,320                   |
| 7                               | \$79,280                   |
| 8                               | \$88,240                   |
| For each additional person add: | \$8,960                    |

You must provide documentation for all sources of income in your home. The documents must represent their current income. Do not send original documents, as they cannot be returned and block the first 5 digits of all Social security numbers in all documents, only the last 4 digits are allowed to be seen. See page 3 for acceptable income documents.

List each person that has earned or unearned income. If someone has more than one source of income, use multiple lines.

**INCOME INFORMATION**

| First and Last Name | Name of Employer or Income Source | Gross Amount Before Taxes | How Often Received |
|---------------------|-----------------------------------|---------------------------|--------------------|
| Example: John Smith | Employment - Kroger               | \$1200                    | Bi-Weekly          |
| Example: Jane Smith | Child Support                     | \$475                     | Monthly            |
|                     |                                   |                           |                    |
|                     |                                   |                           |                    |
|                     |                                   |                           |                    |
|                     |                                   |                           |                    |
|                     |                                   |                           |                    |

X

SIGNATURE OF PRIMARY LEGAL GUARDIAN REQUIRED

DATE

PLEASE RETURN THIS FORM AND ALL INCOME DOCUMENT COPIES TO THE ADDRESS BELOW.

Must Be Submitted By the priority application period deadline, April 15th, 2020.

Ohio Department of Education, Scholarship Program Office  
25 S. Front Street, Mail Stop 309 Columbus, Ohio 43215