Income Guidelines

Preschool Scholarships follow the poverty guidelines issued by the Department of Health and Human Services to determine eligibility. The guidelines are a simplification of the poverty thresholds for use for administrative purposes for instance, determining financial eligibility for certain federal programs. Below is the chart eligibility to be used of the 2020-2021 preschool year.

Health & Human Services Eligibility Guidelines 2020					
Size of	*100%	200%	300%		
Family					
2	17,240	34,480	51,720		
3	21,720	43,440	65,160		
4	26,200	52,400	78,600		
5	30,680	61,360	92,040		
6	35,160	70,280	105,480		
7	39,640	79,280	118,920		
8	44,120	88,240	132,360		
For families units more than 8 members, add, 4,480					
to the 100%, 88,960 for 200% and 13,440 for 300%					
*Child may meet the income eligibility					
requirements for Head Start					

August 1 deadline, until funds are allocated. Scholarship limit is \$75.00 or \$200.00 per month.

Eligibility

Preschool assistance is based on family income.

Payment of preschool scholarships will be made directly to the preschool the child attends. Reimbursements will start in September and end in May. If the scholarship does not cover the cost of tuition the parents will be responsible for any remaining amount due.

To qualify for preschool assistance the following criteria must be met:

- Child must turn 3 or 4 years of age prior to September 15, 2020.
- Referrals will be made to Head Start for families at or below 100% of HHS Poverty Guidelines.
- Awards will be based on income eligibility, and serve 4 year old children & 200% HHS poverty first.
- Gross family income falls under HHS Poverty
 Guidelines of 300% if funding is available.
- Children attending a program that participates in the Statewide Voluntary Preschool Program (SWVPP) (State funds) may be eligible (wrap around/fee charged to parents).
- Goal is for children to have at least one preschool experience (this year).
- Attend a preschool provider that participates with the BVCS ECI Preschool Scholarship program.
- Scholarships are awarded based on need.
 Definition: those at the lowest income are considered a higher need.
- Complete and submit the application, including proof of income/Foster care.

Preschool Scholarships 2020-2021



Buena Vista, Crawford, Sac Early Childhood Iowa

"Every Child beginning at birth will be healthy and successful"



A partner in the Statewide Initiative

Scholarships are **dependent** upon funding **allocated** to Buena Vista, Crawford and Sac Counties Preschool Scholarship Program.

Application Process

Approved applications are approved by the BVCS ECI office.

Incomplete applications may delay your funding start date.

Approved applications will be reimbursed starting in September and ending in May.

Approval notice will be sent to the parent and/or preschool identified on your preschool the child is attending in August.

Quality Preschool Eligibility:

For a preschool to be eligible to participate in the scholarship program they must have one of the following:

- Quality Rating System, Level 3 Rating or higher;
- Quality Preschool Program Standard, Verification;
- National Association for the Education of Young Children, Accreditation;
- Follow Head Start Performance Standards;
- Preschool **must** charge a fee to parents;
- Have a signed agreement on file with BVCS Early Childhood Iowa.
- Use the Ages & Stages Questionnaire

Preschool Information		2020-2021 Preschool Scholarship Application			
Preschool Name:		Address/Location:			
I certify that this child is considering enrollment in our preschool program, Preschool Director/Teacher/Principal:			Yearly Tuition:		
Hours of Preschool Day:	Days Attending Preschool (weekly):	T 🗆 W 🗆 TH 🗆 F	Monthly Tuition:		
Hours of Preschool Day:	Days Attending Preschool (weekly):	T L W L TH F	Monthly Tuition:		

Child & Family Information					
Name of child attending Preschool: First and last:	Date of Birth:		Ethnicity of child:	□ Hispanic	Not Hispanic
Parent/Guardian in household: First and last:			Ethnicity of parent:	□ Hispanic	Not Hispanic
Parent/Guardian in household: First and last:			Ethnicity of parent:	Hispanic	Not Hispanic
Mailing Address:	City:	State: IA		Zip Code:	
County of Residence:	Daytime phone number:				
Email address:					

Household Information					
Race of Head of	Race of Head of HouseholdMarital Status of Head of Household:Education Level of Head of Household: Select highest level		el completed Household Size:		
Native America or Alaskan Native African American White	 Native Hawaiian/Pacific Islanders Multi-racial Asian 	Married Sing Partnered Dive Separated Wid		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
HOUSEHOLD INCOME VERIFICATION: Eligibility is based on your income. Please supply a copy on one of the following: 2018 Federal Income Tax Statement (page 1 note: "blacken out" SS numbers) or copies of paystubs for one months' time period or copy of eligibility for: National School Lunch Program, Medicaid, FIP, Child Care Subsidy, LiHEAP, Weatherization, WIC, or Title V, (if you qualify for a program listed, you must submit proof of approval with your application). Important Do Not email any information with your Social Security Number listed on the document.					
Name of person/s with income:		Employer name: (Please circle) Paid: Weekly - Twice a month - Every 2 Weeks - Month			
Name of person/s with income: (Please circle) Paid: Weekly - Twice a month - Every 2 Weeks - Monthly					
Release of Information					
(name of parent), authorize BVCS Early Childhood Iowa AND/OR its agents or designees from the following agencies: preschool listed as Preschool of Choice, lead Start, preschool program in which the applicant enrolls. BVCS Early Childhood Iowa also has my authorization to share any necessary information with the above agencies in regards to ttendance, cost of program, developmental level. I understand that this information may be requested throughout the year and this release shall expire one year from the date of my signature hereto,					
contact the above organization to verify that we qualify for on the above assistance. Return Applications to:					
	Your Preschool or mail to: BVCS Early Childhood Iowa				
	PO Box 174				
Number of persons living in household	Household Yearly In	come:		Breda, IA 51436 Phone number for assistance	
Qualifies	Under 100% 200%	300% 🗌 Family Ove	Income Requirements	712-662-3880	
Contacted Head Start	Qualifies - Scholarsh		Notes:	Please Do Not fax applications	
Child Attends Head Start	Scholarship Start Da	te	Postcard sent to parents on		

Please Do Not fax applications bvcs.eci.director@gmail.com