

2023-24 Jon Peterson Special Needs Scholarship Forms

To Apply:

- return 2 pg application
- proof of address
- remote services agreement
(for speech, OT, PT)

JON PETERSON SPECIAL NEEDS SCHOLARSHIP 2023-2024 STUDENT APPLICATION

*** Student Data Must Match Birth Certificate ***

STUDENT INFORMATION

NAME: _____
(First) (Middle) (Last)

DATE OF BIRTH: _____ CITY OF BIRTH: _____ GENDER: FEMALE MALE

NATIVE LANGUAGE: _____ MOTHERS MAIDEN NAME: _____

LAST FOUR DIGITS SSN#: _____ CURRENT GRADE LEVEL 2022-2023: _____ GRADE LEVEL 2023-2024: _____

ETHNICITY : Asian/Pacific Islander American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander
(Select Only One) Black/Non-Hispanic Multiracial Hispanic White/Caucasian/Non-Hispanic

IS YOUR STUDENT REGISTERED FOR HOME SCHOOLING? OR ATTENDING A PRIVATE SCHOOL?

REGISTERED AS HOME SCHOOLED: YES NO

IF NO, PROVIDE NAME OF PRIVATE SCHOOL STUDENT WILL ATTEND: _____

PRIMARY GUARDIAN

I AM THE (CHECK ONE): Natural Parent Adoptive Parent Residential Parent Student that is at least eighteen years of age
 Legal Guardian of student applying for scholarship funds

NAME: _____
(First) (Middle) (Last)

DATE OF BIRTH: _____ SSN# LAST FOUR DIGITS: _____

PHYSICAL ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ E-MAIL: _____

RELATIONSHIP TO STUDENT: _____ IN WHAT COUNTY DO YOU LIVE? _____

IN WHAT SCHOOL DISTRICT DO YOU LIVE? _____

SECONDARY GUARDIAN

NAME: _____
(First) (Middle) (Last)

DATE OF BIRTH: _____ SSN# LAST FOUR DIGITS: _____

PHYSICAL ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ E-MAIL: _____

RELATIONSHIP TO STUDENT: _____

THIS FORM MUST BE RETURNED TO THE PROVIDER WITH CURRENT PROOF OF ADDRESS

PROOF OF ADDRESS

Proof of residency is required of all first year and renewal applicants and must be submitted to the provider with the application. Parents/Guardians must document residency by supplying the provider with a current (less than 90 days old) utility bill. The utility (electric, gas, water, sewer, cable/internet) bill **MUST SHOW MATCHING SERVICE AND MAILING ADDRESS** in the name of the parent/guardian. Post office boxes (except in rural areas where residents only have a PO Box) and cell phone bills have no service address and therefore are not accepted.

Other Acceptable Documents: A monthly mortgage statement (less than 90 days old) **OR** lease/rental agreement (signed by lessee and lessor) **AND** a piece of current business mail (examples: pay stub, bank statement, insurance statement, car payment statement, etc) with parent/guardian's name and address. *****Additional information can be found on the scholarship webpage.*****

AUTHORIZATION AND RELEASE OF INFORMATION

AGREE TO THE FOLLOWING:

I _____ (Parent Name)

1. The information provided on the application is true and accurate;
2. I have submitted only one Jon Peterson Special Needs Scholarship application for this student;
3. I have received the profile of the provider's special education program required by division (B) of section 3310.521 of the Ohio Revised Code (ORC) and rule 3301-101-09 of the Ohio Administrative Code (OAC);
4. I have received the comparison document required by section 3323.052 of the ORC, and I understand that acceptance of a scholarship relieves the school district of residence and the school district in which the student is entitled to attend school, if different, of the obligation to provide the child with FAPE;
5. I understand that acceptance of a scholarship after the receipt of the comparison document is informed consent to the provisions of sections 3310.51 to 3310.64 of the ORC and to the provisions of the rules in this chapter;
6. I will inform the provider, my district of residence, and the department immediately of any change in the student's residential address, contact information or custody status;
7. I will inform the department, my provider and my district of residence of my withdrawal from the program and the return to the public school system;
8. I will inform the department of the addition or change of a selected service provider;
9. I will sign all scholarship checks received by my providers for my student in a timely manner. I understand that if I fail to endorse the scholarship checks to the provider, I will be responsible for paying the student's tuition and fees;
10. I understand that the scholarship can only be used for my child's tuition and services agreed upon between provider and parent;
11. I understand that the scholarship can only be applied to the tuition and fees of the provider(s), and that I will be required to pay tuition and services that exceed the amount of the scholarship and services and costs as prescribed by the policies of the provider;
12. I understand that my student will not be eligible to receive scholarships in subsequent years if the student fails to take required assessments prescribed for the student's grade level under section 3301.0710 or 3301.0712 of the ORC;
13. I agree to abide by the dispute resolution process described in rule 3301-101-12 of the OAC;

I authorize the Ohio Department of Education, my school district of residence, the district of my nonpublic school and my selected providers to share the following information regarding my child: current and past Individualized Education Program (IEP), Evaluation Team Report (ETR), data for the IEP and ETR development including progress and interim reports.

BY SIGNING BELOW, I AGREE TO ALL THE ABOVE STATEMENTS.

I AUTHORIZE: _____ (Name of Provider)

to apply on my behalf for the Scholarship Program through the Ohio Department of Education's electronic application system.

Signature of Primary Guardian: _____ **Date:** _____

THIS FORM MUST BE RETURNED TO THE PROVIDER WITH CURRENT PROOF OF ADDRESS

Remote Service Agreement

STUDENT'S NAME: _____ DATE: _____

PARENT/GUARDIAN NAME: _____

EMAIL: _____ PHONE: _____

STUDENT MEETS REQUIREMENTS FOR VIRTUAL SERVICES (i.e. behavioral, cognitive, motor, etc.): YES NO**SESSION TYPE:** _____

(NAME OF SERVICE)

SERVICE(S) WILL BE PROVIDED VIRTUALLY IN REAL-TIME USING: _____
(NAME OF WEB-PLATFORM)

It is the responsibility of the student/parent/guardian to maintain the necessary technology requirements as outlined below:

- Computer or tablet with audio and video capabilities
- High speed internet
- Quiet/private workspace
- Access to e-helper/facilitator as needed

PARENT/GUARDIAN HAS BEEN PROVIDED WITH A COPY OF VIRTUAL SERVICES HANDBOOK/POLICIES: YES NO

By signing, I confirm acceptance of remote services and have been provided with a copy of parent/student handbook including fee for services.

Parent/Guardian Date_____
Provider Date

Office of Nonpublic Educational Options Scholarship Programs

Acceptable Forms of Address Proof

Proof of residency is required of all first year and renewal applicants and must be submitted to the provider with the application. Parents/Guardians must document residency by providing the provider with **one (1)** of the following three (3) options. **All documentation must be dated within the 90 days.**

Acceptable Documentation:

Choose only one (1)

1. A current (less than 90 days old) utility bill. The utility (electric, gas, water, sewer, cable/internet) bill **MUST SHOW MATCHING SERVICE AND MAILING ADDRESS** in the name of the parent/guardian. Post office boxes (except in rural areas where residents only have a PO Box) and cell phone bill have no service address and therefore are not accepted.
2. A monthly mortgage statement (less than 90 days old) **OR** lease/rental agreement (signed by lessee and lessor) **AND** a piece of current business mail (examples: pay stub, bank statement, insurance statement, car payment statement, etc) with parent/guardian's name and address.
3. If the student's parent/guardian has no utilities in his/her name, then the parent/guardian must provide **all three (3)** of the following:
 - a. A **signed and notarized statement** from the person (i.e., third party) with whom the parent/guardian and the student live or from whom they rent that confirms that they reside at the address. This letter must be from the third party, not the parent/guardian **AND**
 - b. A **copy of a current utility bill** in the name of that third party. **AND**
 - c. A **copy of a piece of current business type mail** in the name of the parent/guardian.
 - Business mail would be items such as pay stubs, car notes, car insurance, monthly bank statements, or official documents from a government agency. It must be a business with which the parent/guardian is currently doing regular business.
 - NO credit card solicitations or service set-up work orders. NOTHING HANDWRITTEN.

Third party Proof of Residency Examples:

Example 1: Ms. Smith's daughter has a scholarship. She and her daughter reside with her uncle, Mr. Brown. Mr. Brown will need to write or type a statement, and have it notarized, which should include him signing the statement in front of a notary. He will also need to provide a copy of a current utility bill in his name, since he owns or rents the property. Ms. Smith must provide a copy of last month's bank statement. Compiled together, this alternative will suffice as proof of residence for the student regarding the current school year. She must do this annually. If she should move and obtain utilities in her name, then this alternative method is no longer her option, and she must comply with the required utility bill requirement instead.

Example 2: Mr. Johnson's son has a scholarship. Mr. Johnson and his son live in an apartment. All the utilities are included in the price of the rent, so Mr. Johnson does not receive any utility bills in his name. Mr. Johnson will need to obtain a notarized letter from the rental office confirming that he and his son live in the apartment. Mr. Johnson will also need to provide another form of address proof, such as a current pay stub or bank statement.

Unacceptable proof of address includes cell phone bills, tax forms, junk mail, driver's licenses, and any document more than 90 days old.

Parents/guardians **must** keep the provider informed of any address changes that occur and submit the required documentation to ensure continued program eligibility.