

Bluebonnet Home Scholars Collaborative

2022–23 Church-Matching Scholarship Application

As funds are available, BHSC offers Church-Matching Scholarship Awards to a family or families who otherwise would not be able to afford to enroll in the BHSC classes they'd like their students to take.

Eligibility Requirements

The Bluebonnet community is proud to include families from a wide variety of places of origin, walks of life, and cultural backgrounds. We warmly welcome scholarship applicants who share the [BHSC vision](#), who affirm [BHSC Creed & Principles](#), and who agree to fulfill the [parent/guardian responsibilities](#). To be eligible for the scholarship award, the applicant, if not already enrolled, must also submit [this scholarship application](#) and [all three parts](#) of the BHSC [enrollment application](#) by or on **April 29, 2022**, attend a [required](#) information session by **May 26, 2022**, participate in the admissions family interview by **June 7, 2022**, and submit enrollment paperwork and registration fees by **June 15, 2022**.

How & When to Apply

Complete and return the following application **on or before April 29, 2022**. Be sure to also complete the BHSC Scholarship Application AND the BHSC [enrollment application](#) by that date as well if you have not already applied for admission.

DEADLINES For full-year (Fall 2022–Spring 2023) enrollment, the **final deadline for all requirements is June 15 and as described above**. For mid-year (Spring 2023) enrollment, all requirements must be met by **December 1**.

SCHOLARSHIP TERMS

- Students must demonstrate need as determined by BHSC Scholarship Application process.
- BHSC will match Church Matching donations up to \$100 per student per school year, with the BHSC matching portion divided equally over the regular ten months of tuition (so \$10/month).
- The minimum-enrollment eligibility threshold for the Church Matching Scholarship will be enrollment in 3 or more classes/student; tuition-free courses do not count toward the minimum-enrollment eligibility threshold).
- Families who withdraw a student or students from the program before the end of the school term will receive a match only for the months that they attend; the amount of the scholarship would then equal less than the \$100 church-matching award.
- The scholarship may only be applied towards tuition fees.
- Families who receive a BHSC scholarship award are expected to fulfill all required volunteer hours and are ineligible for the parent volunteer “buy out” option.

CHURCH DONATION ELIGIBILITY

- The church may not submit funds from wages, internships, or gifts from individuals to a specific student for the Church Matching Scholarship.
- Families may submit up to two (2) applications from separate churches for their match. Each application must include a check (or one-time wire payment) of the full anticipated amount from that church. An initial matching scholarship can therefore be increased one (1) time by a subsequent church match application from a different church. Once the full match amount is reached, any remaining funds from a church will be applied to the family's account without a match. All applications must be received or postmarked by the respective deadlines.
- For the purposes of this scholarship, a “church” is understood as a congregation holding weekly worship services. Donations from other non-profit organizations will not be matched.
- The church will be notified if a student is ineligible for the match and will have the option to rescind their donation.

Extensions or exceptions to these guidelines will not be granted. Please contact the BHSC Executive Team with questions at contact@bluebonnetscholars.org.

Purpose: This form is used to verify family and student eligibility for the Church Matching Scholarship. The awarding of the scholarship is based on need, availability of funds, and the guidelines listed in this document. Both the family and the church are responsible for reading and following the scholarship guidelines. Funds are limited.

CHURCH INFORMATION (To be completed by the church only. Asterisks indicated required fields.)

*Church Name: _____ *Phone Number: _____

*Name of Church Official: (must not be related to the student) _____

*Title: _____ Church Official's Email: _____

*Check Number: _____ (Checks must be payable to BHSC.)

By signing below, I (the church official) agree to the following items:

- The attached check is made payable to BHSC.
- The attached check is not from an individual or for wages earned by the student.
- I understand that only one check per church application will be matched.
- I have read the scholarship guidelines on the first page of this form.

Church Official's Signature (Required): _____ Date: _____

Award Process

To maintain a fair review process, all scholarship applications are reviewed by a neutral, out-of-state party who suggests an award decision based on established criteria. The applications and suggested award decision are then reviewed by a second neutral party to ensure an equitable process and adherence to objective award criteria.

NON-DISCRIMINATION POLICY: It is the policy of BHSC to admit homeschooling families and students of any race, color, national or ethnic origin to all the rights, privileges, programs and activities generally made available to families and students. BHSC will not discriminate on the basis of race, color, or national or ethnic origin in the administration of its educational policies, admissions policies, scholarship and/or loan programs, or any other programs.

Application

I, the undersigned, acknowledge that I have read and understand the scholarship eligibility requirements and award process, and I understand and agree that knowingly providing false or misleading information will result in the automatic rejection of my application both for financial assistance and for enrollment with Bluebonnet Home Scholars Collaborative. I declare that I have examined the information in this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of Parent/Guardian Printed Name Date

Cell Phone Home/Work Phone

Street Address City, State Zip

Name(s) of Student(s) Enrolling: _____