

Cleveland Scholarship Program

2026-2027 Acceptance Form

This form must be completed by the parent/guardian and submitted to the school. Failure to return this form may result in termination of your scholarship.

Student's Full Name _____

Parent/Guardian Name _____

Private School Name _____

I accept the Cleveland Scholarship. By accepting the scholarship, I acknowledge I am declining/terminating any other scholarships that my child is currently receiving from the State of Ohio. I also acknowledge my child cannot have more than one scholarship from the State of Ohio at any given time.

I have read and agree to abide by the regulations below governing the Cleveland Scholarship Program:

- I have supplied the chartered nonpublic school with a certified copy of the student's birth certificate, copies of all custody/guardianship documentation for the student, and proof of my address.
- I have submitted only one Cleveland application for the student.
- The scholarship amount shall only be applied to the tuition of the enrolling school, and I may be required to pay other fees and costs as prescribed by the policies of the school.
- The school will contact me when it receives the scholarship checks for me to sign. I will have 30 days to sign the check.
- If I transfer my scholarship to another participating chartered nonpublic school, I will notify the school of my intent to withdraw and I will return to the original school to sign any remaining checks.
- I will apply for any and all financial aid or tuition discounts and adjustments made regularly available to the students attending the school in which the student is accepted for enrollment.
- I will be responsible for paying any difference between the scholarship amount and the tuition of the chartered nonpublic school.
- I will inform the chartered nonpublic school and DEW of changes in family income that would impact whether the student is above or below 200 percent of the federal poverty level.
- I will complete the income verification when required.
- I will inform the chartered nonpublic school and DEW of any change in the student's residential address or custody status.
- I have received and understand the policy handbook of the chartered nonpublic school and will abide by its provisions.

I decline the Cleveland Scholarship.

Parent/Guardian Signature _____ **Date** _____

The school will contact you when it receives the scholarship checks for you to sign. Failure to sign the checks will result in the parent/guardian being responsible for the tuition.

Please return this acceptance form to your private school.