



APPLICATION PREVIEW

2019-2020 SCHOLARSHIP APPLICATION

RESERVATION PAGE

Tax Credit Scholarship Reservation
(Reservación para la beca)

You must complete this page in order to have your submission screened and to be invited to participate in the full Empower Illinois application process.
(Debe completarse esta página para que sea revisada su reservación y para después poder ser invitado/a a participar en el proceso entero de aplicación de Empower Illinois.)

Guardian/Parent First Name *(Primer Nombre del guardián/padre)**

Guardian/Parent Last Name *(Apellido del guardián/padre)**

Phone Number *(Número de teléfono)**

Email Address *(Correo electrónico)**

Confirmation of Email Address *(Confirmación de correo electrónico)**

Address Line 1 (street address) *(Línea 1 Domicilio (Número y calle))**

Address Line 2 (apartment, suite, unit, building, floor, etc.) *(Línea 2 Domicilio (apartamento, unidad, edificio, piso, etc.))*

City *(Ciudad)**

State *(Estado)**

Zip Code *(Código Postal)**

Illinois

Note: Order of students on this page is the order in which scholarships will be awarded, subject to the availability of funds.
(NOTA: Las becas se otorgarán conforme al orden de estudiantes en esta página, siempre y cuando haya fondos disponibles.)

Child #1
(Hijo/a #1)

First Name *(Primer nombre)**

Last Name *(Apellido)**

Add Another Child *(Añadir otro hijo/a)*

The following boxes are required for the reservation submission to be considered eligible:
(Las casillas marcadas con un asterisco () son obligatorias para que el envío de la reserva se considere elegible.)*

Agree *([marque la caja] Acepto)*
I hereby confirm that I am the parent or custodian of the child(ren) listed on this form, and I hereby authorize Empower Illinois to access information needed for income eligibility determinations under the Tax Credit scholarship program.
(Confirmando que soy el padre/la madre o el tutor/a tutor/a de los menores indicados en este formulario y autorizo a Empower Illinois a acceder a la información necesaria para las determinaciones de elegibilidad según los ingresos de acuerdo con el programa de becas por crédito fiscal.)

Agree *([marque la caja] Acepto)*
I declare that the information on this form is, to the best of my knowledge, correct and complete. I agree, if requested, to send additional information to support statements on this form. By submitting this application, I also acknowledge that I have read and agree to the terms of the Terms & Conditions and Empower IL Privacy Policy. Under this policy, among other things, pursuant to the Illinois Invest in Kids Act, I authorize Empower Illinois, its service providers, and others as permitted by law to access information needed for income eligibility determinations. I also acknowledge that Empower Illinois may share the information it collects, including names, contact information, and all other information provided by me on this application, with its service providers, schools listed on the application and related school systems, and others as required by law under the Illinois Invest in Kids Act, in order to administer scholarship programs and make income eligibility determinations.
(Declaro que la información indicada en este formulario es, a mi entender, correcta y completa. Acepto, de solicitarse, enviar información adicional para respaldar las declaraciones realizadas en el formulario. Al enviar esta solicitud, también reconozco que he leído y acepto los Términos y las condiciones y la Política de privacidad de Empower Illinois. De acuerdo con esta política, entre otras cosas, conforme a la Ley de Inversión en los niños de Illinois (Illinois Invest in Kids Act), autorizo a Empower Illinois, los proveedores de servicios y otros, según lo permita la ley, a acceder a la información necesaria para las determinaciones de elegibilidad según los ingresos. Asimismo, reconozco que Empower Illinois podrá compartir la información recopilada, incluso los nombres, la información de contacto y toda otra información brindada por mí mediante esta solicitud, con los proveedores de servicios, las escuelas indicadas en la solicitud y los sistemas educativos relacionados, y otros según lo exija la ley conforme a la Ley de inversión en los niños de Illinois, para administrar los programas de becas y realizar las determinaciones de elegibilidad según los ingresos.)

Agree *([marque la caja] Acepto)*
I authorize Empower Illinois to contact me by email and/or text message with additional information related to the mission of Empower Illinois, including information about how parents, grandparents, and guardians can be involved to support making this scholarship possible. My consent or lack of consent will have no effect on my scholarship eligibility.
(Autorizo a Empower Illinois a comunicarse conmigo por correo electrónico y/o mensaje de texto para enviar información adicional sobre la misión de Empower Illinois, incluso información sobre cómo los padres, los abuelos y los tutores pueden involucrarse para que la beca sea posible. Mi consentimiento o falta de consentimiento no afectará de manera alguna la elegibilidad de mi beca.)

Submit
(Someta)

Submit to complete your reservation.
(Someta para completar su reservación.)

Parents Scholarship Hotline: (309) 416-0741 or scholars@empowerillinois.org



- DASHBOARD
- YOUR APPLICATION
- ACCOUNT
- LOG OUT

Your Application

Application ID: [XXXXXXXXXXXX]

Application (2019-20 School Year)



Step 1 - Eligibility Check

Primary Residence

Address Line 1 Address Line 2

City State Zip Code

Household Details

For all adult earners in the household, you need to include their income in the Adjusted Gross Income listed below.

Adjusted Gross Income Adjusted Gross Income Year

Number of Adult Earners in the Household Number of Adult Non-Earners in the Household Number of Children in the Household

Student(s) Details

Below are the students from your reservation. Please complete the information requested for each student.

Student #1

First Name Last Name Middle Initial

Gender Race Is this student of hispanic origin? Yes No

Date Of Birth 2018-19 School Year Grade 2019-20 School Year Grade

Did the student receive a tax credit scholarship in the previous year?

Yes No

Is this student a foster child?

Yes No

Student #2

First Name Last Name Middle Initial

Gender Race Is this student of hispanic origin? Yes No

Date Of Birth 2018-19 School Year Grade 2019-20 School Year Grade

Did the student receive a tax credit scholarship in the previous year?

Yes No

Is this student a foster child?

Yes No

Save & Continue



- DASHBOARD
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Your Application

Application ID: [redacted]

Application (2019-20 School Year)



Eligible to Continue Application

Thank you for providing this information. Based on the information you reported, each of the student/s on this application is eligible for a scholarship. Being determined eligible for a scholarship does not guarantee in any way that a scholarship will be provided to a student on your application. Scholarships are awarded as funds are available. Additionally, you may be required to respond to future requests for additional information. Before a scholarship is provided to your student, Empower Illinois will need to verify the accuracy of the information you reported.

Continue



- DASHBOARD
- YOUR APPLICATION
- ACCOUNT
- LOG OUT

Your Application

Application ID: [redacted]

Application (2019-20 School Year)



Step 2 - Parent / Custodian Information

Parent / Custodian #1

First Name Last Name Middle Initial

Date Of Birth Phone

Relationship to Dependents in the Household Parent's Marital Status

Work Information
 Work Status Has this Parent / Custodian been employed within the last year? Yes No

List all employers for the last tax year

Job #1

Employer Name


+ Add Another Job

Does this Parent / Custodian own a business or are they self-employed?
 Yes No

+ Add Another Parent / Custodian

Save & Continue

STEP 03




- [DASHBOARD](#)
- [YOUR APPLICATION](#)
- [ACCOUNT](#)
- [LOG OUT](#)

Your Application

Application ID: [XXXXXXXXXXXX]

Application (2019-20 School Year)



Step 3 - Household Financial Information

You will be asked to upload your supporting documents on Step 5.

My household members have filed a Form 1040 for either 2017 or 2018.

Yes No

If you or any adult members of your household have not filed a Form 1040 for 2017 or 2018, but have received a Form 1099, please total the amounts that appear on all of your Form 1099s.


\$

If you or any adult members of your household do not have a Form 1040 or 1099, please total the amount from the most recent paystub or W-2 from all employers for all adult members of your household.

\$

[Save & Continue](#)

STEP 04




- [DASHBOARD](#)
- [YOUR APPLICATION](#)
- [ACCOUNT](#)
- [LOG OUT](#)

Your Application

Application ID: [XXXXXXXXXXXX]

Application (2019-20 School Year)



Step 4 - Student Information

Order of students on this page is the order in which scholarships will be awarded, subject to the availability of funds.

Student Household

Did this student attend private school during the 2018-2019 school year?

Yes No

Is this student eligible to receive services under the Federal Individuals with Disabilities Education Act?

Yes No

Is this student classified as an English language learner as defined in Section 14C-2 of the Illinois School Code?

Yes No

Is this student classified as gifted or talented as defined in Section 14A-20 of the Illinois School Code?

Yes No

Student #1 - School Choices in Order of Priority

Priority One School

Priority Two School

Priority Three School

[Save & Continue](#)

STEP 05

Application (2019-20 School Year)

Progress bar: Eligibility Check (✓), Parent / Custodian Information (✓), Household Financial Information (✓), Student Information (✓), **Required Documentation (5)**, Review (6)

Step 5 - Required Documentation

Income Documentation for most recent tax year (Form 1040 or Form 1099 or W-2 or pay stub)
Please upload documentation to support your Household Financial Information that you reported on Step 3. If you are uploading your 2017 or 2018 Form 1040, you do not need to upload any other documentation. If you submit more than one document, make sure those documents are from the same tax year.

+ Add Another File

Confirmation of your residence for the tax year 2017 or 2018
If your current address matches the address on the Form 1040, W-2, or paystubs as uploaded above, that is sufficient to verify your address and no other address documentation is required. Otherwise, please upload a confirmation of your residence for the tax year 2017 or 2018. Similar to above, make sure your confirmation of residence document is from the same year as your income document.

STEP 06

Application (2019-20 School Year)

Progress bar: Eligibility Check (✓), Parent / Custodian Information (✓), Household Financial Information (✓), Student Information (✓), Required Documentation (✓), **Review (6)**

Step 6 - Review

I agree to the following statement:
I authorize Empower Illinois to share the directory information it collects, including names and contact information, with the schools I have selected in the application and their related school systems, so that those schools and school systems can contact me to provide additional information about their programs.

I Agree

I agree to the following statement:
I hereby confirm that I am the parent or custodian of the child(ren) listed on this form, and I hereby authorize Empower Illinois to access information needed for income eligibility determinations under the Tax Credit scholarship program. I declare that the information on this form is, to the best of my knowledge, correct and complete. I agree, if requested, to send additional information to support statements on this form. By submitting this application, I also acknowledge that I have read and agree to the terms of the Terms & Conditions and Empower Illinois Privacy Policy. Under this policy, among other things, pursuant to the Illinois Invest in Kids Act, I authorize Empower Illinois, its service providers, and others as permitted by law to access information needed for income eligibility determinations. I also acknowledge that Empower Illinois may share the information it collects, including names, contact information, and all other information provided by me on this application, with its service providers, schools listed on the application and related school systems, and others as required by law under the Illinois Invest in Kids Act, in order to administer scholarship programs and make income eligibility determinations.

I Agree

Sign and Submit:
I authorize Empower Illinois to contact me by email and/or text message with additional information related to the mission of Empower Illinois, including information about how parents, grandparents, and guardians can be involved to support making this scholarship possible. My consent or lack of consent will have no effect on my scholarship eligibility.

I Agree

**STEP
07**

EMPOWER ILLINOIS

YOUR APPLICATION

Application (2019-20 School Year)

Eligibility Check Parent / Custodian Information Household Financial Information Student Information Required Documentation Review

Application Sent!

Your Reservation ID # [REDACTED]

Student ID # [REDACTED]