Academic Year 2023-2024



Student Application for **OSTC** Scholarship Funds

Form OSTC

Use this form for all OSTC Scholarship applications from 07/01/2023 - 06/30/2024.

Part 1	To be completed by parent/guardian		
1.	Student Name		
2.	Student Date of Birth		
3.	School Name		
4.	Student Gender (select one) Male Female		
	Student's Ethnic Identity African-American Hispanic		
	(select one)		
	☐ Caucasian ☐ Other (specify)		
6.	Student's Grade in September 2023		
		ng to this sch	nool in September 2023
8.	Student resides within the boundary of which school Philade	lphia	Chester-Upland
	district? (select one)	own	
9.	Name of the public school Student is eligible to attend:		
10.	Head of Household Name		
11.	Head of Household Relationship to Parent	Other F	amily Member
	Student: (select one) Legal Guardian	Foster	Parent
	☐ Grandparent	Other	
12.	Head of Household Contact Phone		
13.	Head of Household Contact Email		
14.	Head of Household Street Address		
15.	Head of Household City, State, Zip		
16.	2022 Adjusted Gross Income (Line 11 on your 2022 Form 1040) \$		
17.	Number of People in Your Household, including Student		
18.	Is the amount of your 2022 Adjusted Gross Income listed on Line 16 less in	than or equ	al to the PA State
	income limit of \$127,537? (NOTE: For each dependent in your household oth	er than your	Student, increase
	this amount by \$19,088.)		
	ightarrow $ ightarrow$ If the answer to the question on Line 18 is "No," then STOP HERE. You are no	t entitled to an (OSTC Scholarship.
19	a. Take the number of people in your household from Line 17 and	Household	Maximum Adjusted Gross
	locate it in the <i>Household Size</i> column in the table to the right. Then,	Size	Income
	write the <i>Maximum Adjusted Gross Income</i> amount next to that	2	\$33,874
	number here \$	3	\$42,606
		4	\$51,338
	b. Is the amount you wrote on Line 16 <i>equal to or less than</i> the	5	\$60,070
	amount on Line 19a.? (check one) Yes No	6	\$68,802
	→ If the answer to Line 19b. is "Yes," then under Pennsylvania State law, you will receive	7	\$77,534
	preference for an OSTC Scholarship.	8	\$86,266
		9	\$94,998
		10	\$103,730
20.	Which type of documentation are you attaching to this application for the		
		FACTS rep	
	Form C	ontinues on	Page 2

	21. Please tell us how this scholarship will benefit your student and family.			
	22.	Your input is valuable and can help us provide even more scholarships! N	May we contact you and/or your	
		student and/or share your story for marketing or fundraising purposes?	☐ Yes ☐ No	
l hereb	V CE	ertify that, to the best of my knowledge, the information provided on this	application is true and accurate.	
		an Signature	Date	
Part 2		To be completed by the school		
	23.	Amount of OSTC Scholarship requested for this Student on this application	on\$	
		This Student is a resident of one of the following school districts: Philade		
		Upland: Yes No	, , , , , , , , , , , , , , , , , , , ,	
	25.	The public school this Student is eligible to attend (Line 9) is on the PA Li	st of Low-Achieving Schools for	
		the most current year:		
	26.	This Student's household Adjusted Gross Income for 2022 is at or below	the PA State income limit	
	_0.	(Line 18), as indicated by the Parent/Guardian's "Yes" response to the qu		
		Yes No	ication on Line 10.	
	27	This Student is new to this school in the 2023-2024 school year OR has re	eceived an OSTC scholarshin at	
	۷,	your school in some previous year Yes No	eccived an objectional ship at	
		your school in some previous year		
ما مسمما ا				
	_	rtify that, to the best of my knowledge, the information provided on this Signature	Date	
ieau oi s	CHOO	Signature	Date	
Office	Use	Only		