



Central Pennsylvania Scholarship Fund

K-12th Grade EITC Scholarship Application

Scholarship Amount Requesting: \$ _____

Applications must be received in the office of Central PA Scholarship Fund at:

C P S F, Attn: Tami Clark 227 Jefferson Ave., Tyrone, PA 16686

Please print or type:

Student's Name: _____

Guardian(s) Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: _____ E-mail: _____

School Attended Last Year: _____

Grade: _____ Did the student attend public school last year? _____

School Applying To: _____

Annual Household Income: \$ _____ (*attach pages 1-2 of current Tax Return*)

Total Family Members in Household: _____

Do you live in a low achieving school district? _____

Print Name(s)

Date

Signature(s)