

**UCCS Family Development Center Scholarship**

**About the Scholarship**

Any student who does not meet SAP (Satisfactory Academic Progress) for two or more consecutive semesters *may not* be eligible for this scholarship.

The Family Development Center (FDC) offers a child-care scholarship for undergraduate or graduate students. This scholarship for UCCS students can be used solely for the purpose of paying child care costs at the Family Development Center. The scholarship amount will vary depending upon individual needs and fund availability.

The Family Development Center (FDC) provides care for children ages one year old (and walking) through Prekindergarten. Children must be enrolled for a minimum of 2 full days per week. Enrollment at the FDC is contingent upon space availability for your child.

Should you be selected as a recipient of a childcare scholarship, you must call (719-255-3483) or come to the FDC within ten days of notification for a tour of the facility and completion of the enrollment packet.

Scholarships will be given semester by semester to students enrolled at UCCS for the semester which they are hoping to get the child care scholarship. The amount will be determined accordingly. Recipients will be required to complete a Student Status Sheet and a Qualitative Program Assessment form each semester.

**Eligibility Requirements:**

* **Enrolled in a degree seeking academic program at UCCS for a minimum of 6 credit hours for Fall and Spring and 3 credit hours for Summer**
* Child enrolled at the Family Development Center
* Must be eligible for need-based aid - determined by the Free Application for Federal Student Aid (FAFSA)
* Not currently receiving the CCAMPIS Scholarship
* Must submit the Summer Application for financial aid

**How to apply:**

Fill out the scholarship application and return to Ida Bauer at the Family Development Center by August 10, 2017. You may either turn this document into the Family Development Center directly at the physical location, or email a copy to ibauer@uccs.edu. You will be notified by letter on your sign-in sheet or via mail or e-mail.

**Questions:**

Contact the Financial Aid Office at 255-3420 if you have any questions about this opportunity.



**UCCS Family Development Center Scholarship Application**

**Fall 2017 - *You must be enrolled in a degree-seeking program at UCCS for the semester indicated on this application.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SID UCCS E-Mail Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name First MI

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (Day) Phone (Evening)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Graduation Date (Mo./ Yr.) Class Level (Freshman, Sophomore, etc.)

**Children’s Information:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_\_ Birth date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_\_ Birth date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_\_ Birth date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you enrolled in a degree seeking program at UCCS for the semester for which you are applying for the child care scholarship [** ] yes [ ] no *If no, then you are not eligible for scholarship. Do not turn in this form.*

**Are you CCAP eligible?**  [ ] yes [ ] no [ ] don’t know

**Are you currently receiving CCAP assistance?** [ ] yes [ ] no

If yes, please attach copy of most recent authorization.

**Are you currently enrolled at The Family Development Center?** [ ] yes [ ] no

I authorize the release of my academic and financial information by the UCCS Office of Financial Aid to the scholarship selection committee, scholarship donors, and media, if appropriate, for the Family Development Center Scholarship. I understand that if I have not completed a FAFSA or cannot show financial need, I may not be awarded.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_