

**Anabaptist Scholarship Foundation  
Of Virginia  
3955 Singers Glen Rd. Harrisonburg, VA 22802  
(540) 820-8633**

**2024-2025 Family Application Form**

*Applications cannot be processed unless they are fully completed and include a copy of the - All pages of the 2023 IRS Form 1040*

*PLEASE do not send all of the various schedule forms and child credit forms - we only need the 1040 form*

**Filing Deadline Oct. 15, 2024**

**A new application is required EACH year.**

**Please list all of your children that are in this school - even children that may not qualify.**

**IF A CHILD IS NOT NAMED WE WILL NOT KNOW HOW MANY CHILDREN YOU HAVE IN SCHOOL.**

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_ Gender:  Boy  Girl

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_ Gender:  Boy  Girl

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_ Gender:  Boy  Girl

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_ Gender:  Boy  Girl

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_ Gender:  Boy  Girl

1<sup>st</sup> Parent/Guardian's Name: \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_ (Street or PO Box) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code)

Home or Cell Phone: (\_\_\_\_) \_\_\_\_\_ E- mail: \_\_\_\_\_

VA County/City: \_\_\_\_\_ VA School District: \_\_\_\_\_

Number of people reported on IRS tax return form 1040 for my/our household in 2023: Total Dependents, including self \_\_\_\_\_

**Household Income Information:**

Refer to the 2024 Poverty Guideline that is provided on the ASF website (asfva.org) to determine if your family qualifies for a scholarship award.

**School Information:**

List the school your children will be attending with the aid of the Anabaptist Scholarship Foundation of Virginia: *(Note: if you have children attending different qualifying schools, a separate application must be filed for each school.)*

School Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street or PO Box) (City) (State) (Zip Code)

School contact person \_\_\_\_\_ Phone \_\_\_\_\_

**Certification Signature:**

I certify that all of the above information is true and correct and the Federal Forms 1040 enclosed provide a true and accurate verification of my annual household income. I understand that the deliberate misrepresentation of the information may result in the scholarship being denied or terminated. I understand that the scholarship payments will continue for the complete 2024-2025 school year, only as long as my child is enrolled at a qualified school. Once a scholarship is issued for a student, the scholarship will follow the student, in the event the student transfers to another qualifying school during the current school year. In the event the student transfers to a non-qualifying school, any unused portion of the scholarship award will be retained by ASF for other scholarships. Further, I understand that the scholarships are awarded according to the prioritized selection of the qualified applicants, as per the guidelines established by the Commonwealth of VA and by Anabaptist Scholarship Foundation of Virginia, and that the scholarships given are the sole responsibility of ASF and the school. All decisions are final.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please return this form, along with your 2023 1040 tax form, in a sealed envelope to your school administrator. He/she will send all applications to ASF in one bundle.