

2022 KidsCollege@PVCC Scholarship Application

This form available online at: www.pvcc.edu/KidsCollege/scholarships



Thank you for your interest in KidsCollege@PVCC programs! All four parts of this scholarship application must be fully completed, including the income verification, before it will be reviewed. No Academy spots are reserved until the scholarship has been approved and the partial fee payment received. Scholarships are available on a first come, first served basis. Academies are open on a space available basis.

Increased scholarship amounts available. If students qualify (and provide verification) for the free/reduced school lunch income eligibility guidelines:

- Academy fee: \$30 per academy

After receiving a completed application, you will be notified of the scholarship decision and the remaining tuition fee amount due. The partial tuition fee must be paid BEFORE a student is registered for an Academy.

Please COMPLETE ALL FOUR PARTS and return to: PVCC Workforce Services, KidsCollege@PVCC, 501 College Dr., Charlottesville, VA 22902. Fax: 434.961.5270. Questions? Email: kidscollege@pvcc.edu or call 434.961.5354

PART 1: PARENT/GUARDIAN

Student's Name: _____ Grade Level next Fall (2021-2022) _____

School currently (2021-2022) attending: _____

Parent's Name: _____ E-mail: _____

Phone: _____

Address: _____

PART 2: INCOME VERIFICATION- REQUIRED DOCUMENTS (select one)

Public School Student

Is the student enrolled in the Free and Reduced Lunch program at school? Yes No

I have attached a copy of the 2019-2020 eligibility notification letter from Child Nutrition Food Services or a school verification letter.

OR

Homeschool or Private/Independent School Student

I have attached my most recent tax return.

Number of individuals in household: _____ Annual Household Income: _____

I certify that the income verification information is complete and correct.

Parent's Signature: _____ Date: _____

[How do I set up a digital signature?](#)

PART 3: STUDENT INTEREST (Students, please answer this question.)

Why do you want to participate in KidsCollege? _____

PART 4: APPLICATION FORM (Application includes: Registration Form, Student Information and Assumption of Risk/Photo Release/ Student Conduct Form)

Student Name _____ (for office use: Empl.ID _____)

STUDENT INFORMATION

SIGN-IN/SIGN-OUT INFORMATION

(additional names can be added later by parent/guardian. Please include your own name, if applicable)

Please list the names of the parent(s) and/or other adults who have permission to pick the student up, including parent signing below.

By signing this form, the parent gives permission for the adults listed below to pick his or her child up from the Academies:

1. Name _____

Relation to student: _____ Phone number: _____

2. Name _____

Relation to student: _____ Phone number: _____

3. Name _____

Relation to student: _____ Phone number: _____

Adults listed above may be asked to show photo I.D. at pick-up. Please have I.D. ready.

EMERGENCY CONTACTS

In case an emergency situation arises who should we contact first? Include your own name, if applicable, contact:

1. Name _____

Relation to student: _____ Phone number: _____

(OPT. Additional Phone number: _____)

2. Name _____

Relation to student: _____ Phone number: _____

(OPT. Additional Phone number: _____)

HEALTH NEEDS/SPECIAL CONSIDERATIONS

1. Does the student have any allergies, or other health issues or conditions? No Yes
Please explain: _____

2. Does the student take any medications? No Yes
Please list: _____

3. Will your student need to take any of these medications during the program? No Yes

4. Does the student carry a respirator, EpiPen, or other medical device? No Yes
Please explain: _____

5. Does the student have any special learning or behavioral needs? No Yes
Please explain: _____

Additional Comments: _____

Send payment and registration forms to PVCC Workforce Services, 501 College Drive, Charlottesville, VA 22902.

For more information or to register by phone with a credit card, please call 434.961.5354 or KidsCollege@pvcc.edu.



KidsCollege Registration Form

Online registration available at www.pvcc.edu/kidscollege. To register in-person, phone or by mail: Complete all forms (Registration Form, Assumption of Risk) and make a payment. Mail/bring to PVCC Workforce Services, 501 College Drive, Charlottesville, VA 22902. Questions and/or to register: 434.961.5354 or KidsCollege@pvcc.edu. Payment must be received at time of registration. Scholarships available based on financial need. All scholarship and registration forms at www.pvcc.edu/kidscollege.

Student's (Child's) Name _____

School _____ Grade level in fall 2021/2022 _____

Male Female Date of Birth: ____/____/____ Social Security #: _____

Student previously enrolled in a PVCC KidsCollege Academy or class? YES NO

Parent or Legal Guardian Name _____

Phone _____ E-mail Address: _____

Address: _____

City _____ State: _____ Zip: _____

(optional) Additional Parent or Legal Guardian Name: _____

Phone _____ E-mail Address _____

Address: _____

City: _____ State: _____ Zip: _____

Student's Ethnicity: Hispanic/Latino Asian American Indian/Alaska Native Black/African-American
 White/Caucasian Native Hawaiian/Other Pacific Islander Choose Not To Specify

Is the student a U.S. citizen? Yes No If no, country of citizenship: _____

Permanent Status: Resident alien Asylee Refugee #: _____

What is the student's current immigration status with the U.S.? Not in U.S. I am requesting visa status
 Currently in U.S. Student is a dependent of someone who served in the military.

How did you learn about KidsCollege@PVCC Summer Academies? Brochure from school Returning student Online (website, email, social media) Other: _____

ACADEMIES (include early care, lunch & After-Academy Club, if applicable)

#Number	Date	Academy Title or Program Title	Fee
TOTAL			\$

Please make payment to Piedmont Virginia Community College.

DO NOT FAX OR EMAIL CREDIT CARD INFORMATION. Call 434.961.5354 to pay with credit card.

Method of payment: Visa • MasterCard • AMEX

Signature: _____ Date: _____



2022 KidsCollege@PVCC

ASSUMPTION OF RISK/PHOTO RELEASE/STUDENT CONDUCT FORM

I (the student) agree, that as a participant in the 2022 KidsCollege@PVCC Programs at Piedmont Virginia Community College (PVCC), including spring and summer academies, and workshops, scheduled between January 1, 2022, and Dec. 30, 2022, I am responsible for my own behavior and well-being. I accept this condition of participation, and I acknowledge that I have been informed of the general nature of the risks involved in this activity.

I understand that in the event of accident or injury, personal judgment may be required by College personnel regarding what actions should be taken on my behalf. Nevertheless, I acknowledge that the College personnel may not legally owe me a duty to take any action on my behalf. I also understand that it is my responsibility to secure personal health insurance in advance, if desired, and to take into account my personal health and physical condition.

I further agree to abide by any and all specific requests by the College for my safety or the safety of others, as well as any and all of the College's rules and policies applicable to all activities related to this program.

In consideration for being permitted to participate in this program, and because I have agreed to assume the risks involved, I hereby agree that I am responsible for any resulting personal injury, damage to or loss of my property which may occur as a result of my participation or arising out of my participation in this program, unless any such personal injury, damage to or loss of my property is directly due to the negligence of the College. I understand that this Assumption of Risk form will remain in effect during any of my subsequent visits and program-related activities, unless a specific revocation of this document is filed in writing with the program coordinator, at which time my visits to or participation in the program will cease.

Student Code of Conduct (Parent/guardian and student to review)

I will treat fellow students, PVCC faculty and staff with respect at all times, including: respectful listening, participation during hands-on activities, avoid distracting behavior and follow directions from PVCC staff as necessary to ensure a safe and enjoyable experience by all. I understand that the College reserves the right to exclude my participation in this program if my participation or behavior is deemed detrimental to the safety or welfare of others. I agree to the expectations for behavior, which includes not smoking, chewing gum, rough-housing or using inappropriate language. I understand that cell phones and electronic games are allowed for limited use as permitted during breaks.

I understand that the consequences for breaking these rules may include

1. A warning from the instructor
2. Meeting with program manager and/or staff
3. A home call and/or meeting with the parent/guardian
4. Being asked to leave the program without a refund.

Photo/Video Release

I hereby grant to PVCC, and to the press and media, the right to photograph, videotape, or otherwise digitally collect my likeness, voice and sounds (as "Works") during my participation in the KidsCollege@PVCC programs. I further acknowledge that these cooperating entities have the right to use or sublicense these Works in all forms and for all purposes, including without limitation, advertising and other promotions for the KidsCollege@PVCC programs, including on the KidsCollege@PVCC Facebook page. It is a PVCC policy not to print a minor's name with his/her picture without specific permission from his/her parent or guardian.

My child/ward is under 18 years of age and I am hereby providing permission for him/her to participate in this program, and I agree to be responsible for his/her behavior and safety during KidsCollege@PVCC programs.

I acknowledge that I (student or parent/guardian) have read and fully understand this document. I further acknowledge that I agree to the terms and conditions of this form, and I am accepting these personal risks and conditions of my own free will.

Parent/Guardian Signature (Type Name)

Date

