



Scholarship Application

The Harvest Temple Scholarship Granting Organization (HTSGO) is a state-certified, nonprofit scholarship granting organization that provides students with funding to attend Harvest Temple Christian Academy (HTCA). Scholarships will be awarded to students who meet the following criteria:

- Are enrolled or have applied for enrollment at HTCA in kindergarten through twelfth grade.
- Have submitted a complete and accurate scholarship application form and all necessary income documentation.
- Have met all previous financial obligations to HTCA.

Please fill out this application completely.

There is no fee to apply. The contact information provided by the parent during the application process must belong to the parent or guardian on the application.

Parent or Guardian Information

Name: (First/Middle/Last)		
Present Address: (Street Address)		
City:	State:	Zip:
Phone:	Alt. Phone:	
Email:	Number of Persons in Your Tax Household:	

Student Information

Student 1 Name: (First/Last)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (MM/DD/YYYY)
Student 2 Name: (First/Last)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (MM/DD/YYYY)
Student 3 Name: (First/Last)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (MM/DD/YYYY)
Student 4 Name: (First/Last)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (MM/DD/YYYY)
Student 5 Name: (First/Last)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (MM/DD/YYYY)

Please briefly explain why you are applying for a scholarship from the SGO.

Income Verification

The State of Ohio requires Scholarship Granting Organizations to prioritize low-income families in scholarship awarding. To maintain our organizational certification, we verify applicant's income level. Please use the Income Verification Form available on our website to verify your income. Information about income verification is at www.htcaclyde.com/sgoparentinfo.

I have completed this application accurately to the best of my knowledge.

Signature of Primary Parent or Legal Guardian

Date

Please mail this form and all required documentation to the address below or email to sgoinfo@htcaclyde.com.
Please send copies of original documents. Documents will not be returned.
Must be submitted by the scholarship application deadline.

HTSGO Scholarships
1022 South Main Street | Clyde, OH 43410