



The Division of Medical Sciences Childcare Scholarship Application Form

Please complete all fields and submit all relevant paperwork by the deadline. Checks will be mailed at the end of each semester. We currently anticipate awarding amounts of \$2,500.00 per family per semester.

Eligibility criteria (subject to change):

- You must be a registered Division of Medical Sciences student in good academic standing.
- Have children who must
 - Be your legal dependent.
 - Live with you in the United States.
 - Are under the age of 12.
- OR are expecting to have a child during the current academic year.
 - Please list the due date in the date of birth field so we can determine eligibility.
- Have a total household income below \$150,000
 - If your total household income is above \$150,000, you can still apply, but depending on the availability of funding, you may not receive the scholarship.

What we require (subject to change):

- Completed form

Details (subject to change):

- The scholarship will be distributed twice a year, half at the end of the fall semester and half at the end of the spring semester by check sent to your home address.
- The scholarship is per family, not per child.
- This scholarship is considered income and will need to be declared on your taxes. You will receive a 10-99 form from Harvard University.
- Students are eligible to receive the award for a maximum of five years.
- Those deferring during the award year may not be eligible for the entire annual scholarship. Funding will be considered on a case-by-case basis.

Submit application by email to:
Nikki Crouse (Nikki_crouse@hms.harvard.edu)

**The Division of Medical Sciences
Childcare Scholarship Application Form**

Name

HUID Program & G year

Email

Address

(this is the address to which your check will be mailed. If you are planning on moving in the next six months, please let us know)

Significant other name

Significant other Occupation

Adjusted gross household income from previous year tax return

Estimated adjusted gross household income for previous year

Have you applied for any other childcare aid from Harvard? What is the fund and award amount?

Please add any other information that would be helpful for us to know.

	Child's first and last name	Date of Birth
1		
2		
3		
4		

Make a copy for your records

Please sign & date