GEORGIA GOAL
SCHOLARSHIP PROGRAM, INC.

Georgia GOAL Scholarship Program
Tuition Assistance Application

Georgia GOAL Scholarship Program, Inc. does not accept scholarship applications directly. Parents desiring to apply for a scholarship should complete the following information and submit it directly to Morgan Conner at Bulloch Academy While completion and submission of this form does not guarantee receipt of a GOAL Scholarship, it is the initial step in the process. In awarding scholarship funds, Bulloch Academy will work closely with its existing tuition assistance office and scholarship committee.

- The submission deadline for applicants is April 18, 2025
- If you have filed for an extension ***you will be awarded tentatively*** until the appropriate paperwork is submitted. Your GOAL award will not be applied to your account until all required documents have been submitted. Failure to submit these documents will result in a ZERO award for the 2025-2026 school year.
- Applicants ***must be current and in good financial standing*** with the Bulloch Academy Business Office in order to be awarded.

To qualify for receipt of a GOAL Scholarship, a student must be a Georgia resident who is currently enrolled in and has attended a Georgia secondary or primary public school for a least 6 weeks* immediately prior to receiving a scholarship or tuition grant under this law, or who is eligible to enroll in a qualified Pre-K4, Kindergarten, or 1st grade program.

*The six week attendance requirement may be waived in the following cases:

1. A student is or would be assigned to a public school that the Office of Student Achievement determines to be a low-performing school based on the school attendance zone of his or her primary residence, or
2. A student is the subject of officially documented cases of school based physical violence or student related verbal abuse threatening physical harm, or
3. A student was enrolled in an official home study program for at least one year immediately prior to receiving a scholarship or tuition grant under this law.

Student Name: _____

Date of Birth: _____

Applying for Grade: _____

Parent(s) or Guardian(s) Name(s): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email Address: _____

Information and Documentation Required

GOAL requires the following to be submitted to Bulloch Academy to process the request for scholarship funding:

1) Proof of Income:
    a. Federal Tax Return (pages 1-2)
    b. Do you have any non-taxable income, including any of the following? If so, please list the amounts below:
        i. Annual Child Support Received _____
        ii. Annual Workers' Compensation Received _____
        iii. Annual Allowances Received for Housing, Food & Living Expenses _____
        iv. Other Annual Untaxed Income & Benefits _____

2) Proof of Eligibility:
    a. Proof of Public School Enrollment (report card)
    b. Birth Certificate (only applicable to students eligible for Pre-K4, Kindergarten, or 1st grade)
    c. Proof of Another HB 1133 Scholarship Award
    d. Proof of Home School or Low-Performing Public School

3) If desired, any additional supporting documentation to demonstrate the need for tuition assistance

Please explain any current financial conditions that differ from those reported on your latest Federal Income Tax Return. Use the reverse side, if needed.

Applicants receiving a GOAL Scholarship must reapply via the school on a yearly basis for consideration. Funds are awarded each year based on need and availability. GOAL Scholarship recipients must maintain academic and behavioral standards set forth by Bulloch Academy.

If further assistance is needed, contact Morgan Conner at mconner@bullochacademy.com. To learn more about the Georgia GOAL Scholarship Program, please visit www.goalscholarship.org.

Bulloch Academy admits students of any race, color, and national or ethnic origin.
We understand that we are authorizing Bulloch Academy to verify any of the information in this tuition assistance application and understand that all information is subject to investigation. We declare that the information represented on this form, to the best of our knowledge and belief, is true, correct, and complete.

_____ _____
Signature of Parent(s) or Guardian(s) Date