



Little Apron Academy (LAA) Scholarship Application

Associate Information

Associate Name	
Associate ID	
Email Address	
Phone Number	

Parent / Guardian #2 Information

Name	
Associate ID (if applicable)	
Relationship	
Email Address	
Phone Number	

Child(ren) Information

Child 1 Name	
Child 1 Birthdate	
Child 1 Program	
Child 2 Name	
Child 2 Birthdate	
Child 2 Program	
Child 3 Name	
Child 3 Birthdate	
Child 3 Program	

Household / Family Information

Address	
City, State, Zip code	
Family's Current Gross Annual Household Income (including any spouse/child support received)	

Eligibility for an LAA Scholarship:

- Available to associates who enroll their child into LAA, AND
- Provide verification that they have a gross annual household income less than \$100,000, AND
- Are in an ACTIVE or LOA employment status with The Home Depot.

Additionally, you understand and/or agree with the following provisions:

- LAA Scholarships are available on a limited basis and are not guaranteed.
- If granted a scholarship, it will be valid for the current calendar year.
- If you have a change in employment status with The Home Depot, a change in your child’s enrollment status at LAA, or a change in family household income or family status, these changes could impact your LAA Scholarship amount or availability.
- Any amount received under the LAA Scholarship program will be considered and reported as taxable income, however Home Depot will provide a gross-up (additional money an employer pays an employee to offset any additional income taxes).

Accepting an LAA Scholarship:

If you would like to accept a LAA Scholarship, you are required to:

- Confirm by your signature below that you meet the eligibility requirements above as well as understand and agree with the stated provisions above, AND
- Provide your family’s current gross annual household income above, AND
- Have a LAA staff member verify your household income, by visually reviewing the following documents:
 - Two current consecutive pay statements AND
 - A copy of most recent tax return (form 1040 front page only)

Associate Signature	
Print Name	
Date	

Attestation Verification

Office Use Only

Income Verification	
Verification Review Date	
Award Decision	
Signature of Enrollment Manager	
Executive Director Signature	
Effective Date of Award	