

Academic Scholarships

Scholarships is Georgia's statewide educational assistance program for early childhood educators pursuing credentials or degrees in early childhood education. Scholarships assists approved applicants with tuition and mandatory fees and provides a support stipend directly to them.

Please complete this application no earlier than 60 days prior to the semester you plan to attend. Applications can be completed and returned to support@decalscholars.com. Mailed-in applications will not be accepted.

Eligibility Requirements:

Legal Status

- You're one of the following:
 - United States citizen
 - Legal permanent resident
 - Qualified alien

Employment

- You must have maintained **30 days of continuous employment** in one of the following roles (volunteer work, practicums, and internships do not qualify):
 - Teacher
 - Assistant teacher
 - Floater
 - Director
 - Assistant director
 - Owner
- You must work a minimum of **30 hours per week** if your employer is one of the following:
 - A child care learning center licensed by DECAL or the Department of Defense
 - A family child care learning home licensed by DECAL
 - Before/after school program licensed by DECAL
 - An exempt Georgia Head Start center
 - A Georgia Lottery-funded Pre-K program in a public school



Please note: The eligibility requirements will change on October 1, 2024.

Include the Following Documents with this Application:

- Copy of two recent pay stubs reflecting your name, the name of your employer, and your gross (before deductions) wages. Family child care learning home providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income.
- Copy of Submission Summary from FAFSA (*not applicable to the Master's Degree or Montessori Program Credential*).
 - Once you have received notice of financial aid:*
 - Financial aid award information available on your educational institution's student portal
 - OR your Submission Summary from FAFSA
 - If you are ineligible to receive financial aid:*
 - My College HOPE Profile from GA Futures showing you have exceeded the number of eligible credit hours covered by HOPE and documentation showing you have exceeded the maximum disbursements from the Pell Grant
 - OR Your verified bachelor's degree in GaPDS
 - OR Your college transcript showing you have earned your bachelor's degree
- Copy of your schedule of classes.
- Copy of your Georgia Professional Development System profile reflecting your GaPDS number, the name of your current employer and valid license number, and a pending or active status (see page 8 for more information).
- Copy of the FRONT and BACK of a secure and verifiable document (see page 6 for more information).
- Program documentation - enrollment letter, unofficial transcript, or grade report (*not applicable to Technical Certificate of Credit (TCC) or Montessori programs*).
- Montessori Only:* Proof of Enrollment & Good Standing Letter.


Document formats DECAL Scholars will accept: Legible PDFs, screenshots, photo copies, scans, and photos. Please do not send documents as links. **ALL documents must be received by the last day of classes for the semester you're applying for to be considered for eligibility.**

Award and Institution Information

Name of institution you attend/will attend: _____

Term/year you wish to be considered for Scholarships (i.e. Fall 2024): _____

Select the early childhood education credential or degree you wish to earn:

PROGRAM OF STUDY	INSTITUTION ELIGIBILITY	TUITION AWARD INFORMATION	MINIMUM GPA REQUIREMENT
<input type="checkbox"/> Technical Certificate of Credit (TCC) (specify which): _____	Georgia technical college	80% of tuition and mandatory fees not covered by HOPE, Pell or other awards, scholarships or grants.	2.0 GPA
<input type="checkbox"/> Technical College Diploma (TCD)	Georgia technical college	80% of tuition and mandatory fees not covered by HOPE, Pell or other awards, scholarships or grants.	2.0 GPA
<input type="checkbox"/> Associate Degree	Georgia technical college OR HOPE-eligible institution offering degree in Early Childhood Education, Child Development or Child Care Administration	Public Institutions: 80% of tuition and mandatory fees not covered by HOPE, Pell or other awards, scholarships or grants. Private Institutions: Up to \$2,496 per semester of tuition and mandatory fees not covered by HOPE, Pell or other awards, scholarships or grants.	2.0 GPA
<input type="checkbox"/> Bachelor's Degree	Georgia HOPE-eligible institution offering degree in Early Childhood, Child Development or Child Care Administration	Public Institutions: 80% of tuition and mandatory fees not covered by HOPE, Pell or other awards, scholarships or grants. Private Institutions: Up to \$2,496 per semester of tuition and mandatory fees not covered by HOPE, Pell or other awards, scholarships or grants.	2.5 GPA
<input type="checkbox"/> Master's Degree	Georgia public or private institution offering degree in Early Childhood, Child Development or Child Care Administration	Up to \$1,800 per term of tuition and mandatory fees.	2.5 GPA
 Please note: The Academic Scholarships program will not accept new Master's Degree applicants after October 1, 2024.			
<input type="checkbox"/> MACTE Accredited Montessori Program (Infant/Toddler and Early Childhood Program only)	Montessori Teacher Education Institute of Atlanta OR Grace Montessori Teacher Education	Up to \$2,496 per term of tuition and mandatory fees.	Proof of Enrollment & Good Standing Letter

Support Stipend:

- \$250 (1-3 credit hours) or \$500 (4+ credit hours)
- Family Child Care Learning Home Providers \$750 (1-3 credit hours) or \$1,500 (4+ credit hours)
- Montessori Program Credential \$500
- Infant Toddler Program* \$500 (1-3 credit hours) or \$1,000 (4+ credit hours)

*Infant Toddler Program: TCC: Any of Georgia's technical colleges offering an Infant/Toddler Care Specialist Technical Certificate of Credit; Bachelor's Degree: Fort Valley State University's Infant & Child Development program

No separate application is necessary for Academic Scholarships recipients to receive the support stipend and POWER-ED wage supplement. These amounts are issued after the add/drop period at the educational institution.



POWER-ED: The Academic Scholarships POWER-ED wage supplement program will end at the conclusion of the Fall 2024 semester. DECAL Scholars Academic Scholarships recipients will receive one final \$1,000 POWER-ED wage supplement for fall of 2024.

Applicant to Complete this Section:

Name: _____ County of Residence: _____
Full name as it appears on your social security card

Mailing Address: _____
Street address (including apartment number) OR post office box

City: _____ State: _____ Zip: _____

Cell Phone: () _____ E-mail: _____

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Gender:

- Female
- Male
- Non-binary
- I prefer not to answer
- Other: _____

Race:

- White
- Black / African-American
- Asian
- Native American / Alaskan Native
- Native Hawaiian / Pacific Islander
- Bi- / Multi-Racial
- Other: _____

Ethnicity:

- Hispanic/Latino
- Not Hispanic/Latino

Employer/Director to Complete this Section:

Name of Facility: _____
As it appears on license/registration

Facility Address: _____
As it appears on license/registration

City: _____ State: _____ Zip: _____ County: _____

License/Registration Number: _____ Phone: () _____

Facility Type (check one):

- Child Care Learning Center
- Family Child Care Learning Home
- After School Program
- Georgia Lottery-funded Pre-K
- Georgia Head Start Center

Licensed By (check one):

- Georgia Department of Early Care and Learning (DECAL)
- Department of Defense (DOD)

Applicant's Employment Information:

Applicant's Primary Job Title: Floater Assistant Teacher
 Teacher Assistant Director Director Owner

Is the applicant a Georgia lottery-funded Pre-K teacher?

Is the applicant a Head Start or Early Head Start teacher?

Number of hours applicant works each week: _____

Number of months per year applicant works: 9 10 12

Number of months per year applicant is paid: 9 10 12

Applicant's currently hourly wage: \$_____

Applicant is paid: Weekly Bi-Weekly Bi-Monthly Monthly

Applicant's date of hire: ____/____/____ (original hire date if employment is continuous with present employer at different locations)

If applicant is in the classroom, # of children in classroom: _____

Ages of children in classroom:

- Birth-1
- 1-2
- 2-3
- 3-4
- 4-5
- 5-12

Family Child Care Learning Home Owners Only:

Date you opened your facility: ____/____/____

Number of hours your facility operates each week: _____

Number of children currently enrolled: _____

Ages of children currently enrolled:

- Birth-1
- 1
- 2
- 3
- 4
- 5

Net income from previous year's IRS Schedule C tax form: \$_____

Child and Adult Care Food Program (CACFP)?

Serve GACAPS subsidized children?

As Owner, Director, Principal, or Human Resources Manager, I verify that the above employment information for this applicant is true and accurate. I understand and agree that receipt of Scholarships monies by the applicant will not affect any salary adjustments the applicant may be eligible to receive through our program. If the applicant is participating in the Scholarships program, I agree to give the applicant paid leave time to allow the applicant time to attend class, study, and complete classwork.

Name (print): _____ Title (print): _____

Signature: _____ Date: _____

Statement of Affirmation and Renewal Information

Final Signature

STATEMENT OF AFFIRMATION: Read carefully before signing and dating. Unsigned applications will not be processed.

I _____, (applicant's name), under penalty of perjury, attest that all of the information appearing on this application and in supporting documentation is true to the best of my knowledge. I understand that any false or incomplete information knowingly provided on this application or in supporting documents may be grounds to be denied participation in this program and may prevent me from future participation in any DECAL Scholars programs and other DECAL programs, grants and initiatives. I understand that intentionally providing false information on this application or in supporting documents is a violation of state law and may result in civil or criminal proceedings. I authorize any agent or employee of Georgia Department of Early Care and Learning to verify this information and release it to any necessary party for my consideration in this program. I understand that, if approved and awarded funds, I may receive a 1099 tax form and am required by the IRS to report the income on my tax return. I also understand and agree that my personal information may be shared with the Georgia Professional Development System.

- I will notify DECAL Scholars immediately of any changes in my schedule or of a decision to withdraw.
- I will attend all classes and complete all assignments in order to receive Scholarships from DECAL Scholars.

Applicant Signature: _____ Date: _____

Last 4 Digits of Social Security Number: _____

Renewal Requirements

- Submit copies of your grades upon completion of the prior term (not applicable to Montessori Program Credential).
- Submit copy of schedule of classes for next term (or Proof of Enrollment and Good Standing Letter for Montessori Program Credential).
- Submit a copy of two recent pay stubs reflecting your name, the name of your employer, and your gross (before deductions) wages. Family child care learning home providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income.

Affidavit For Lawful Presence Verification For DECAL Scholars Programs

By executing this affidavit under oath, as an applicant for a DECAL Scholars program payment or for other public benefit as referenced in O.C.G.A. §50-36-1(a)(3)(A), I hereby swear and affirm that the following is true and correct with respect to my application for a DECAL Scholars payment from Bright from the Start: Georgia Department of Early Care and Learning.

Name of Person Receiving Benefit: _____

Section 1: Status

Check only ONE of the following:

- I am a United States citizen 18 years of age or older.
- I am a legal permanent resident of the United States, 18 years of age or older. *(You must submit a copy of the FRONT and BACK of your Legal Permanent Resident card).*
- I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older, with an alien registration number issued by the Department of Homeland Security or other federal immigration agency. *(You must submit a copy of the FRONT and BACK of your Alien Registration Receipt card OR your Employment Authorization card).*

My alien registration number issued by the Department of Homeland Security or other federal immigration agency is:

Section 2: Documentation

- I verify I am providing A COPY OF THE FRONT AND BACK of at least one secure and verifiable document, as required by O.C.G.A. Sec. 50-36-1(e)(1), with this affidavit. **A complete list of acceptable documents is on page 8 of this document.**

The secure and verifiable document I am providing with this affidavit is:

(Identify the document, such as driver's license, birth certificate if last name is still the same, permanent resident card, etc.)

Section 3: Applicant Signature

In providing the above information under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit in any matter within the jurisdiction of any department or agency of state government shall be guilty of a violation of O.C.G.A. §16-10-20 and face criminal penalties as allowed by such criminal statute.

Do not sign and date this document until you are in the presence of a notary.

Applicant Signature: _____ Date: _____

Printed Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Section 4: Notary Signature

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ____ DAY OF _____, 20__

Notary Public Signature: _____

My Commission Expires: ____/____/____

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

Issued February 20, 2018, by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”), as amended by Senate Bill 160, signed into law as Act No. 27, (2013), provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(g). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- **An unexpired United States passport or passport card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired United States military identification card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired driver’s license** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]¹
- **An unexpired identification card** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired tribal identification card of a federally recognized Native American tribe**, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be accessed at: <https://bia.gov> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired United States Permanent Resident Card or Alien Registration Receipt Card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired Employment Authorization Document** that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired passport issued by a foreign government**, provided that such passport is accompanied by a United States Department of Homeland Security (“DHS”) Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual’s lawful immigration status or other proof of lawful presence under federal immigration law² [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired Merchant Mariner Document or Merchant Mariner Credential** issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired Free and Secure Trade (FAST) card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- **An unexpired NEXUS card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- **An unexpired Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- **An unexpired driver’s license** issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Certificate of Citizenship** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **A Certificate of Naturalization** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **Certification of Report of Birth** issued by the United States Department of State (Form DS-1350) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **Certification of Birth Abroad** issued by the United States Department of State (Form FS-545) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **Consular Report of Birth Abroad** issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **An original or certified copy of a birth certificate** issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

Georgia Professional Development System Information

All individuals applying for DECAL Scholars programs must register with the Georgia Professional Development System for Early Childhood Educators (GaPDS) as a part of the application process.

The GaPDS is separate from DECAL Scholars. It records and maintains your professional development information – your training and/or any credentials or degrees you earn, in one convenient location.

Registering is easy! You can sign up immediately, even if you have not earned a credential or degree, by entering any recent early childhood or related training you have received.

1. Gather your relevant training certificates, credentials, and/or transcript(s).
2. Go to <https://gapds.decalsolutions.com>. Click the Login/Register button.
3. Click **Create new account for GaPDS**.
4. Select **I want to create and manage my Georgia Professional Development System Account** and click Continue.
5. Follow the directions, including selecting your employer, to create your confidential account. Be sure to record your username and password and secure them for future use. You will receive a confirmation email. Follow the instructions in the email to complete your account.
6. After completing and saving the Contact, Education, Employment, and Training sections, scroll to the bottom of the page and look for the message **Ready for Submission?** Click on **My Profile**.
7. Scroll to the bottom of the screen and click on the **Continue to Submission** button.
8. Check the box next to **"I certify that the statements I have made to Bright from the Start: Georgia Department of Early Care and Learning . . ."** and click Submit. This will change your GaPDS status from Incomplete to Pending and you will be assigned a GaPDS Number.
9. Click the **Profile** link in the Reports box on the left side of the screen, print your GaPDS profile and submit with your DECAL Scholars application. Your GaPDS profile must reflect your name, your GaPDS number, the name of your current employer, and a Pending or Active status.
10. You will receive an email identifying what you need to submit to the GaPDS to verify the information you entered. **The documents are not shared with the DECAL Scholars programs.**

Two other tabs appear when you enter the system to view your profile: Other Career Data and Demographics. Completing the information under these tabs is voluntary; this data is used by Bright from the Start to determine additional supports and services needed across the state.

You can update your profile at any time by submitting documentation of state-approved trainings, credentials, degrees, conference attendance, etc. as you complete them.

The GaPDS is a tool that benefits the early care and education community in Georgia, and we encourage you to take advantage of this opportunity. Thank you for your continued dedication to your professional development and your commitment to improving the quality of care for young children.

If you have questions or need technical support, contact the GaPDS by phone at 404-334-6461 or email at gapds@decalsolutions.com.