



Scholarship Application

Confidential family request · Early education and Youth Enrichment programs



Our promise: Silly Billies Cares reviews each request with dignity and care. Scholarships depend on available charitable funds and are not based on income alone. Applying, declining to apply, or not receiving an award will never change the quality of a child's care.

1 · Family & child information

Parent/guardian name

Preferred name

Email

Phone

Child(ren) included in this request

Application date

Program location(s) and pathway

☐ Infant & Toddler · Springfield

☐ Preschool · Pleasant Hill

☐ Youth Enrichment

☐ ERDC

☐ Preschool Promise

☐ Private pay

☐ Other/mixed

Requested days/hours or current contracted schedule

2 · Scholarship request

Current or anticipated monthly family tuition

Amount your family can reasonably contribute each month

Amount or type of support requested (dollar amount, percentage, or other)

Preferred award length

☐ Short-term support

☐ Current school year

☐ Please help us decide

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Tell us what support would make possible for your family



3 · Your family's circumstances & strengths

If this scholarship were not available, how would that affect your child or family?

What difference would scholarship support make for your child or family?

Are there recent changes, expenses, transitions, or circumstances you would like the board to understand? (Optional)

What other tuition supports have you applied for or currently receive? (Examples: ERDC, Preschool Promise, employer or community

What strengths, goals, or hopes would you like us to know about your family?

Optional community connection: If you have a skill, hobby, cultural tradition, or interest you would enjoy sharing with our program, tell us below. Participation is always voluntary and is never required for scholarship consideration.

Something we may contact you about sharing (optional)

Scholarship Application

Review process, privacy, and family acknowledgment



4 · How the review works

The Silly Billies Cares board reviews applications with attention to the child's well-being, family circumstances, available resources, and the overall purpose of the scholarship fund. Review periods are generally held in June, August, and December; urgent requests may be considered when board capacity and funding allow. Awards are not guaranteed and may be full, partial, time-limited, or adjusted as funding changes. If approved, the family will receive written award details. A scholarship does not replace the family's Annual Rate & Schedule Agreement.

Privacy & respectful review

Application information is shared only with people involved in reviewing, documenting, or administering the scholarship, except when disclosure is required by law. Board members should step away from a decision when a personal conflict could affect fair review. Please share only information you are comfortable providing; we may contact you if clarification is needed.

5 · Family acknowledgment

- ☐ I believe the information in this application is accurate to the best of my knowledge.
- ☐ I give permission for Silly Billies Cares to contact me about this request.
- ☐ I understand that submitting an application does not guarantee an award.
- ☐ I understand that scholarship decisions are separate from enrollment, placement, and the quality of care provided.
- ☐ If an award is offered, I agree to notify Silly Billies Cares if my family's funding or care schedule changes in a way that affects the award.

Parent/guardian signature (type or sign after printing)

Date

Submit your completed application

Email: sillybilliescares@gmail.com

Questions: 541-606-2919

You may save the completed PDF and email it, or print and return it directly. Please do not send sensitive records unless the board specifically requests them.