

SLIDING SCALE FEE APPLICATION

Welcome to Purpose Learning Lab STEAM Infused Enrichment & Wellness Studio!!!

Purpose Learning Lab, Inc is a 501(c)3 non-profit organization committed to impacting the hearts of youth, children, and families. Every day, we strive to offer quality, affordable programs and services designed to benefit people of all incomes and backgrounds. Eligibility for Purpose Learning Lab's Sliding Scale Program is determined based upon available funding, annual income, and household size. If you are offered a scholarship spot, you will be asked to pay the family contribution amount. In most cases a discounted fee may also be charged per visit/week/month to all eligible children according to our income guidelines and funding availability. This form must be completed for both summer/ after-school months or if your financial situation changes. **Please send your completed application with supporting financial documents to purposelearninglab@gmail.com.** If awarded, all participants must sign the scholarship award letter within 72 hours.

INFORMATION

Parent Name: _____ Date: _____
Preferred Name: _____
Date of Birth: _____ Social Security #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Email: _____
Preferred Method of Contact: _____
Marital Status:

- ☐ Single:
- ☐ Married
- ☐ Separated
- ☐ Divorced
- ☐ Widowed
- ☐ Other

Household Size: _____ (REPORTED ON TAXES)

Child (ren) First & Last Name: _____

Date of Birth: _____

Supporting Documents:

2026-2027 Scholarship Qualifications:

- A copy of your most recent tax return (1040 or 1040EZ) for everyone living in the household, or verification of non-filing (phone number for IRS is 1-800-908-9946)
- The last 2 paycheck stubs of everyone in the household who is working
- Proof of Social Security or Social Security Disability Income, if applicable
- Proof of any other sources of income, if applicable (e.g. Unemployment Compensation, Food Stamps, etc.)
- A copy of your school schedule if applying for childcare and you are a non-working student
- **Alternative Income Verification:** Purpose Learning Lab is committed to making scholarship opportunities accessible to qualifying families. Applicants who do not have a Social Security number, federal tax return, or traditional income documentation may submit alternative documentation to verify household income. Acceptable documentation may include an ITIN tax return, employer verification letter, pay records, bank/deposit records, benefit statements, or a signed household income self-attestation. Immigration or citizenship status is not considered for PLL privately funded scholarships unless required by the specific funding source.

Note: If required documentation is not complete, the process will be delayed.

FAQ Questions:

How much assistance will be provided?

The level of assistance depends on the extent of need and the cost of programs. No one is turned away from PLL because of an inability to pay. However, it is unusual that 100% of the fee is provided since recipients develop a stronger sense of ownership when contributing partially to their involvement. We love parent involvement!

How long will the assistance last?

Assistance is provided for a specific time period and will be reviewed for eligibility every year for Summer Camp and After School. If help is still needed when assistance is reviewed, you will be asked to re-apply. If your circumstances change before the time period is up, please let us know so we may serve others.

Why do we require financial information?

With information on income and family size, we can award assistance in a fair and consistent manner. We use these procedures to ensure that everyone receives equal consideration.

Will my child be able to attend for free?

We do not provide camp/after-school free of charge. For 2026-2027, the maximum Financial

Assistance is 80% of the program rate. Please only apply if you are able to cover this expense. Please note that not all applicants receive the maximum amount of assistance.

Does funding ever run out?

Yes, at times funding does run out and is issued on a first come first serve basis.

Where do you get the money to support?

Our scholarship funding is possible through the generosity of donors to our "Send a Kid to Camp Campaign" or current projects. All money raised through campaigns goes directly to provide assistance through our scholarship program. We also receive funding from organizations to support our mission.

Sliding Scale: Based on funding availability, we use a sliding fee scale based on total household income and the number of household members. We also consider special circumstances when providing assistance, so please include any and all information you feel is

Note: If you do not have a copy of your tax return, you may obtain one by calling the Internal Revenue Service at 1-800-829-0922. If you did not file taxes last year, or if you don't have other documentation required, please submit a letter explaining your personal financial situation.

applicable to your current situation. Recipients are expected to be responsible for a percentage of their program and membership fees. Qualification for financial assistance is reviewed every year. To apply for financial assistance, please complete our application and scan to purposelearninglab@gmail.com

Thank You, Purpose Learning Lab Scholarship Committee

Are you and/or your immediate family members experiencing hardship?

Please circle if your child (ren) attends one of the schools listed below? Spring Valley, Bethesda Elementary, W.G. Pearson Elementary, R.N. Harris, Fayetteville Street, Githens Middle School,

Shepard Middle School, North Oak Academy, Carter Community, Maureen Joy, Voyager Academy Parkwood or Excelsior Classical Academy.

Please circle if your child (ren) attends one of our partner schools?

Fayetteville Street, R.N. Harris, Spring Valley, North Oak Academy,

If your child does not attend one of the schools above, have you heard about GoKart Kids or Transporting the Future ? Yes or No

If not, please contact them as they are an excellent resource for parents who need transportation to our program. Ja'Neshia J 984-260-1017 jjohnson@transportingthefuture.info or hello@gokartkids.com (877) 860-4010

Please Circle Referring Agency:

Families Moving Forward

The Empress Haven, PLLC

POOF

Graced, Inc

Durham Public Schools (Please List School: _____) Durham

Partnership with Children

Other (Please List: _____)

ANNUAL HOUSEHOLD INCOME

Source of Income	Self	Spouse	Other	Total
Gross wages, salary, tips, etc.	\$ _____	\$ _____	\$ _____	\$ _____
Income from business, self-employment, and dependents	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment compensation, workers' compensation, Social Security, SSI, SSDI, public assistance, veterans'	\$ _____	\$ _____	\$ _____	\$ _____

payments, survivors benefits,
pension, or retirement income

Interest, investments, \$ _____ \$ _____ \$ _____ \$ _____
dividends, rents, royalties,
income from estates or trusts,
educational assistance,
alimony, child support,
assistance from outside the
household, and other taxable
income

TOTAL ANNUAL HOUSEHOLD INCOME \$ _____ \$ _____ \$ _____ \$ _____

Note: Noncash benefits, including **food stamps/SNAP and housing subsidies, do not count as income**. Copies of tax returns, pay stubs, benefit statements, or other documentation verifying income may be required before assistance is approved.

2026 INCOME ELIGIBILITY CHART

Annual Income Thresholds by Sliding Fee Discount Pay Class & % of HHS Poverty Guidelines

Family Size	Full Discount ≤100%	20% Pay 100–125%	40% Pay 125–150%	60% Pay 150–175%	80% Pay 175–200%	100% Pay Above 200%
1	0–15,960	15,961–19,950	19,951–23,940	23,941–27,930	27,931–31,920	\$31,921+
2	0–21,640	21,641–27,050	27,051–32,460	32,461–37,870	37,871–43,280	\$43,281+

3	0–27,320	27,321– 34,150	34,151– 40,980	40,981– 47,810	47,811– 54,640	\$54,641+
4	0–33,000	33,001– 41,250	41,251– 49,500	49,501– 57,750	57,751– 66,000	\$66,001+
5	0–38,680	38,681– 48,350	48,351– 58,020	58,021– 67,690	67,691– 77,360	\$77,361+
6	0–44,360	44,361– 55,450	55,451– 66,540	66,541– 77,630	77,631– 88,720	\$88,721+
7	0–50,040	50,041– 62,550	62,551– 75,060	75,061– 87,570	87,571– 100,080	\$100,081+
8	0–55,720	55,721– 69,650	69,651– 83,580	83,581– 97,510	97,511– 111,440	\$111,441+
9	0–61,400	61,401– 76,750	76,751– 92,100	92,101– 107,450	107,451– 122,800	\$122,801+
10	0–67,080	67,081– 83,850	83,851– 100,620	100,621– 117,390	117,391– 134,160	\$134,161+

Sliding Fee Structure

Full Discount — At or Below 100%

Family pays **0%** of the established fee.

20% Pay — Above 100% through 125%

Family pays **20%** of the established fee.

40% Pay — Above 125% through 150%

Family pays **40%** of the established fee.

60% Pay — Above 150% through 175%

Family pays **60%** of the established fee.

80% Pay — Above 175% through 200%

Family pays **80%** of the established fee.

100% Pay — Above 200%

Family pays the **full established fee**.

Source: U.S. Department of Health and Human Services (HHS), 2026 Poverty Guidelines. HHS confirms the 2026 guidelines are used to determine financial eligibility for certain programs.

I CERTIFY THAT THE HOUSEHOLD SIZE AND INCOME INFORMATION SHOWN ABOVE IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF ANY OF THE INFORMATION I HAVE SUBMITTED IS DETERMINED TO BE FALSE, I MAY NO LONGER BE ELIGIBLE FOR THE SLIDING FEE DISCOUNT. SHOULD THIS OCCUR, I MAY BE RESPONSIBLE FOR ANY OUT-OF-POCKET EXPENSES.

Signature: _____ Date: _____

Note: Noncash benefits (food stamps and housing subsidies) do not count as income. Copies of tax returns, pay stubs, or other information verifying income may be required before assistance is approved.

FOR PURPOSE LEARNING LAB, INC OFFICE USE ONLY

Approved Sliding Fee Discount: VERIFICATION CHECKLIST:

PROOF OF IDENTIFICATION

PROOF OF ADDRESS

PROOF OF SSN

COMPLETED TAX RETURN

PROOF OF INCOME (Includes child support, unemployment, food stamps , etc) PROOF OF HARDSHIP
(How Long will applicant receive scholarship: _____) Full Discount

20% charge

40% charge

60% charge

80% charge

100% charge

Current Campaign (_____)

Donor (_____)

Patient is ineligible (Not Submitted on Time/ Missing supporting documents/ does not meet income criteria/ other: _____)

Scholarship Committee Comments:

Approved By: _____ Date: _____

