



**Kamehameha Schools
Financial Aid and Scholarship Services
2010-2011 Pauahi Keiki Scholars Parent's Quarterly Report Form**

Please submit completed forms to:
Kamehameha Schools (KS) Applicant
Services Center (ASC)
567 S. King Street, Suite 102
Honolulu, HI 96813
Fax: (808) 523-6286
Email: asc@ksbe.edu

General Guidelines for Completing the Parent Quarterly Report (PQR).

- **DO NOT SUBMIT BEFORE QUARTER END.**
- Please read the instructions thoroughly before completing this form.
- Incomplete forms and submittal before the quarter end will be returned.

What quarter are you submitting this for:

- Do **NOT** leave this section blank.
- Fill in space with the following chart information located to the right:
- *Deadlines that fall on a weekend are due the next business day.
- Late forms will delay disbursements to the preschool.

Quarter Reporting	Deadline
Aug 1 - Oct 31, 2010	November 7, 2010*
Nov 1 - Jan 31, 2011	February 7, 2011
Feb 1 - Apr 30, 2011	May 7, 2011*
May 1 - July 31, 2011	August 7, 2011*

Attendance

- Maintain an attendance rate of 85%
- No unexcused absences of three (3) or more consecutive days per reporting quarter.
- Attendance reported prior to quarter end will not be counted.
- Input Child's last day of preschool including summer program, if applicable.

Preschool Volunteer Work

- Parent/Legal guardian to complete a minimum of three (3) hours per reporting quarter at child's preschool.
- Three (3) volunteers required per awarded child.
 - i.e two children awarded = 6 hours per quarter
- Hours must be completed within the quarter or made up in a later quarter.
- Hours cannot be transferred from a previous quarter.
- Check with preschool for volunteer opportunities.

Community Service

- Parent/Legal Guardian to complete a minimum of eight (8) hours per school year in the community.
- Complete one form per work site at which services were provided.
- Eight (8) service hours required per awarded child
 - i.e two children awarded = 16 hours of service
- Your choice of community service should:
 - Benefit the Native Hawaiian community or organization
 - Meet a legitimate community need
 - Make a significant impact on you or your child
 - Be unpaid
 - Should **NOT** benefit a KS student/staff/program, nor should it put you in a position to have a relative for a supervisor.

Parent Workshop

- Parent/Legal guardian to complete one (1) workshop per school year.
- Check with school or local community for workshop availability.
- Your choice of parent workshop should:
 - Make a significant impact on you or your child
 - Be of educational value
- Workshop attendance may be used toward Community Service if marked accordingly on PQR.

CYCLE 2 Awardees (January to July 2011):

- January 2011 attendance must be reported by February 7, 2011 via the PQR.
- Exempt from completing January 2011 volunteer hour.
- Eight (8) community service hours are required.
- One (1) hour parent workshop is required.



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Student: Last name _____ First name _____

Preschool: _____

What quarter are you submitting this for: Aug – Oct Nov – Jan Feb – April May - July

1. Attendance: Did student meet scholarship attendance requirements? Yes No
 Please provide dates of unexcused absences during the quarter _____
 Child's last day of preschool (including summer), if applicable: _____

2. Preschool Volunteer Work

Activity or Project	Date (mm/dd/yy)	# of hours	Relationship to student
Total amount of volunteer hours this quarter:			

Preschool authorized signature: _____ Date _____

3. Community Service (List one worksite per PQR)

Name of organization: _____ Phone _____

Name of supervisor: _____ Signature of supervisor _____

Activity or Project	Date (mm/dd/yy)	# of hours
Total hours		

Does your CS benefit Native Hawaiians? Yes No

If yes, How? _____

4. Parent Workshop – Please check here if you would like to apply hours to the Community Service requirement.

Name/Description of workshop _____ Date _____

Location _____ Total hours _____

Parent Certification and Authorization
 I certify that the information provided herein is complete and correct to the best of my knowledge. If I provide false or misleading information, Kamehameha Schools reserves the right to reconsider the scholarship award provided for my child.

 Signature of Parent/Legal Guardian Date _____