



Arizona Private School Tuition Organization

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# Scholarship Application Form

## STUDENT INFORMATION

Today's Date      /      /

Student Date of Birth      /      /

Student Name

LAST

FIRST

MIDDLE

Parent/Guardian Name

LAST

FIRST

MIDDLE

Spouse Name

LAST

FIRST

MIDDLE

Mailing Address

CITY

STATE

ZIP

Parent/Guardian E-mail

Phone

School Name

School City

School year you are applying for

Grade you are applying for

**Please provide brief narrative about your child:**

## Overflow/Plus Eligibility

The following information will assist us to determine what type of scholarships your child may be eligible for. Be sure to read through each question and note what information is required to be submitted with the application. Failure to send in appropriate documentation along with your application will delay processing time.

**1** Is your child transferring from an Arizona public school?

*\*NOTE To check YES, your child must have been enrolled in an Arizona public or charter school for at least 90 days of the previous school year.*

**YES**

**NO**

**IF YES**, please submit a completed [Public School Verification Form](#). This form needs to be attached and/or uploaded to your application

**2** Is your child enrolled in Kindergarten at a private school the 2021-2022 school year?

**YES**

**NO**

**3** Is your child currently a part of the Arizona Foster care system?

**YES**

**NO**

**4** Is your child a dependent of a member of the United States Armed Forces stationed in Arizona pursuant to military orders?

**YES**

**NO**

**5** Is your child currently enrolled in private school and does he/she have a current Individualized Education Plan (IEP) from an Arizona public school or Multidisciplinary Evaluation Team (MET) Please provide the current summary sheet of the IEP or MET along with your application.

**YES**

**NO**

**6** Has your child previously received a tax credit scholarship from APSTO or any other Arizona State Tuition Organization in the previous school year (20-21 or prior) and continued to attend private school in Arizona?

**YES**

**NO**

**IF YES**, please indicate in the space below which of the following awards you have received below (Original Tax Credit Scholarship, Switcher (Overflow/Plus Tax Credit Scholarship, Low-Income Corporate Tax Credit Scholarship, Disabled/Displaced Tax Credit Scholarship):

Type of scholarship award received:

*\*NOTE if this scholarship was given by an organization other than APSTO, you **MUST** provide verification of that award. Please submit a copy of the award letter you received. If you do not have a copy of that award letter, you can have that organization complete the Scholarship Verification Form. This form can be attached to your application.*

# Scholarship Application Form

## HOUSEHOLD INCOME

Household Income: Please read the following instructions to make sure the form is filled out correctly. The financial information must match your 2020 taxes exactly.

### TOTAL NUMBER OF PEOPLE LIVING IN YOUR HOUSEHOLD:

**A Names:** List the first and last names of every person living in your household (adults and children) everyone must be listed whether or not they receive income or not. If no income is received mark the no income box for that entry

**B Gross YEARLY Income:** Following each person's name, list the type of income received on a YEARLY basis.

**Earnings from work:** List gross income from work (wages, salaries, tips, commissions). This is not the same as take home pay; it is the amount earned before taxes and deductions. Gross earnings should be listed on your pay stub. If self-employed, you may report income after expenses (your own business, freelance work farm, or rental property).

**Welfare, Child Support, Spousal maintenance:** including – TANF, General Assistance, General Relief, etc. *NOTE: Food Stamps and FDPIR benefits are not included as income.*

**Pensions, Retirement, and Social Security:** include – Supplemental Security Income (SSI), Veteran's (VA) benefits, and disability benefits.

**All Other Income:** Include: Worker's Compensations, unemployment, strike benefits, net rental income, annuities, net royalties, interest, dividend income, cash withdrawn from savings, income from estates, trust and/or investments, regular contributions from people who do not live in your household, and ANY OTHER INCOME.

### Names

### Annual Income

Names: You must list EVERYONE in your household

Annual Earnings from Work Before Deductions

Welfare, Child Support, Spousal Maintenance

Pensions, Retirement, Social Security

All other income

Check here if no income

Names	Annual Earnings from Work Before Deductions	Welfare, Child Support, Spousal Maintenance	Pensions, Retirement, Social Security	All other income	Check here if no income

**Total Annual House Income:**  
(Summary of everyone listed above)

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## HOUSEHOLD INCOME (continued)

- C Foster Child:** if this an application for a child who is the legal responsibility of a welfare agency or court and is currently living in your household please provide the following information about the child (please list additional foster children on a separate Financial info Form)

Child Name:

Child's Personal Use of Monthly Income: \$

- D Low-income Qualification:** if your household income falls into the corporate low-income qualifying amount, please submit the first two pages of your Arizona Form 140 (Personal Tax Return) along with your application. *\*NOTE You may cross out everything but the last 4 digits of your social security number.*

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I promise that all information on this application is true and that all income is reported to the best of my knowledge:

Signature

Print Name

Date

**Please return this completed form to APSTO**

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