



SCHOOL _____

STUDENT NAME _____ **DOB** _____ **Grade** _____ (for 2021-2022)

Check & Complete ALL THAT APPLY:

- ___ Is receiving an Empowerment Scholarship for the 2021-22 School Year.
- ___ Attended Public School for 90 days in the **2020-2021 School Year**. Which school? _____ Verification Form _____
- ___ Received a Individual PLUS/SWITCHER Tax Credit Scholarship for School Year _____ from _____ (list STO)
- ___ Received a Original INDIVIDUAL Tax Credit Scholarship for School Year _____ from _____ (list STO)
- ___ Received a CORPORATE Tax Credit Scholarship for School Year _____ from _____ (list STO)
- ___ Has continued to attend a private school since receiving tax credit scholarship (s) listed above.
- ___ Student is a dependent of a member of the US Armed Forces stationed in Arizona pursuant to military orders

Parent/Guardian: _____

Last First Middle

Address City State Zip

Relationship to Student (s) Home Phone Email

HOUSEHOLD INCOME: List all people who live in the household and all income they received in the **2020 calendar year**. If no income received, enter none. See reverse (page 2) of this form for income details.

Household Member	Check if Child	Monthly Income (all sources)	Household Member	Check if Child	Monthly Income (all sources)
1			5		
2			6		
3			7		
4			8		

Total ANNUAL Household Income
\$ _____
Total Number of Household Members

FOR OFFICE USE ONLY—	Federal Income Level: ___ up to 185% ___ 185% to 342.25% ___ >342.25%
Student ID # _____	Qualified for Funding Types: Individual ___ Switcher ___ Corporate ___
Total Tuition \$ _____	School Representative Signature _____

A school tuition organization cannot award, restrict, or reserve scholarships solely on the basis of a donor's recommendation. A taxpayer may not claim a tax credit if the taxpayer agrees to swap donations with another taxpayer to benefit either taxpayer's own dependent. (A.R.S. §43-1603)

- A scholarship awarded to the applicant must be used as allowed by Arizona law solely for tuition expenses at a qualified Arizona private school that the applicant attends or will be attending. Any portion unused must be returned by the school to AESF for reallocation. Funding will be sent directly to the school which has requested the funds on behalf of the applicant.
- All funding awards for tuition scholarships are subject to the sole and absolute discretion of AESF.
- The Parent/Guardian completing this application understands that they cannot arrange, cooperate, or facilitate the swapping of a tax credit donation between themselves and any other applicant or group of applicants.
- Scholarships will be awarded without regard to the student's race, color, sex, handicap, familial status or national origin.
- Any recommendation received by AESF on behalf of the applicant is not a guarantee of a scholarship. A variety of considerations will be made, including financial need, before a scholarship is awarded.
- All previous/current funding from other Student Tuition Organizations (STOs) has been reported to the best of my knowledge.

I certify to the best of my knowledge the above information is accurate and complete and I understand that I may be required to supply supporting documentation.

Signature of Parent/Guardian _____ **Date** _____

INSTRUCTIONS FOR HOUSEHOLD INCOME

Household Members - List the first and last name of each person living in your household, related or not (such as grandparent, other relatives, or friends). You must include yourself and all children living with you. Attach another sheet of paper if needed.

Check if Child—Check if household member is a child.

Monthly Income (all sources) —

List **GROSS monthly income** from all sources. (Gross income is the amount earned before taxes and other deductions. The amount should be listed on your pay stub or documentation from employer).

Types of income to be considered: Welfare, child support, alimony. Pensions, retirement, Social Security. All other income: such as: Supplemental Security Income (SSI), Worker's Compensation, Disability benefits, Veteran's benefits (VA benefits), Unemployment, Strike benefits, Regular contribution from people who do not live in your household, Net income from self-owned business, farm, or rental income, and ALL OTHER INCOME.

NOTE—If you are in the Military Housing Privatization Initiative or get combat pay, do not include these allowances as income.

VERIFICATION OF INCOME (MUST be provided if requested AND for consideration for any *Corporate scholarship funding) —

Provide applicable documentation for all income included for each person on page 1. Documents will NOT be returned; please do NOT send originals. **PREFERRED DOCUMENTATION IS PAGE 1 OF YOUR 2018 FEDERAL TAX RETURN.**

Other examples of documentation include but is not limited to those listed below:

JOBS—Paycheck stub which indicates the amount and how often pay is received; letter from employer state gross wages and how often they are paid; or, If self-employed, papers such as ledger or tax books

PENSIONS, RETIREMENT, SOCIAL SECURITY—Social Security retirement benefit letter; statement of benefits received, or pension award notice.

UNEMPLOYMENT, DISABILITY, WORKER’S COMP—Notice of eligibility from State employment security office, check stub, or letter from the Worker’s Compensation’s office.

WELFARE PAYMENTS—Benefit letter from the Arizona Department of Economic Security or Arizona Temporary Assistance for Needy Families (TANF) office.

CHILD SUPPORT OR ALIMONY—Court decree, agreement, or copies of checks received.

OTHER INCOME (I.E. rental income, etc.) - Information that shows the amount of income received, how often it is received and date it is received.

Household Income Chart for 2021-2022

UPDATED as of March 29, 2021

HOUSEHOLD INCOME ELIGIBILITY CHART for Academic Year 2021-2022 (July 1, 2021—June 30, 2022)				
Financial Eligibility for Fund Types	<i>Individual / Switcher / *Corporate</i>		<i>Individual / Switcher / *Corporate</i>	<i>Individual / Switcher</i>
Income Category	UP TO 185%		185% to 342.25%	>342.25%
Household Size	FREE lunch income threshold <i>130% of poverty level</i>	Reduced price lunch income threshold <i>185% of poverty level</i>	342.25% of poverty level threshold <i>185% of 185% of poverty level</i>	> 342.25%
1	\$16,744	\$23,828	\$44,082	> \$44,082
2	\$22,646	\$32,227	\$59,620	> \$59,620
3	\$28,548	\$40,626	\$75,158	> \$75,158
4	\$34,450	\$49,025	\$90,696	> \$90,696
5	\$40,352	\$57,424	\$106,234	> \$106,234
6	\$46,254	\$65,823	\$121,773	> \$121,773
7	\$52,156	\$74,222	\$137,311	> \$137,311
8	\$58,058	\$82,621	\$152,849	> \$152,849
Additional per person	\$5,902	\$8,399	\$15,538	

**Corporate scholarship funding—income documentation MUST be provided for consideration (see VERIFICATION OF INCOME above).*