



PRIOR STO FUNDING VERIFICATION FORM

DEAR PARENT,

Please read these instructions carefully. Your student may be eligible for additional scholarship funding if:

Your student has previously received a scholarship from another Arizona STO in a **previous school year AND your student continues to be enrolled** in a qualified private school since receiving that scholarship.

If this is true, please enter the student's name and the STO below, then **SUBMIT THIS FORM TO THE STO THAT PREVIOUSLY PROVIDED THE SCHOLARSHIP FOR COMPLETION.**

This form is valid ONLY if completed by the STO that previously provided the scholarship, and cannot be completed by you or your student's current school. Once this form is properly completed, please provide it to us with your electronic application or by mail at the address below.

DEAR SCHOOL TUITION ORGANIZATION,

Please provide all the information below regarding this student's prior academic year, specifying the day, month and year for all requested dates.

Student Name:	
School Tuition Organization Name:	
This Scholarship was Awarded As (Please Circle One):	
Corporate Low-Income	Corporate Disabled/Displaced
Individual Original	Individual Switcher/PLUS
Date of Prior Year Scholarship Award (MUST BE A PRIOR SCHOOL YEAR):	
School Awarded:	
Name and Title of STO Representative Completing this Form:	
Signature of STO Representative:	Date: