

Student First Legal Name	Student Legal Last Name
Applicant/Legal Guardian First Name	Applicant/Legal Guardian Last Name
penses (If not Applicable, Leave Blank)	
1) Private School Expenses	
A) Tuition	
School Name:	Tuition Paid: \$Payment Date:
Payment Method: 🗆 Pa	yPal □ Point of Sale □ Web Based/Phone □ Square
Payment Frequency: □W	eekly Bi-Weekly Monthly Semester Quarterly Annual
B) Fees	
<u>Fee Type 1:</u> ☐ Registration☐ Application :	fee
Amount Paid: \$	Payment Date:
Payment Method: 🗆 Payl	Pal
<i>Fee Type 2:</i> ☐ Registration	fee
Amount Paid: \$	Payment Date:
Payment Method: 🗆 Payl	Pal □ Point of Sale □ Web Based/Phone □ Square
Fee Type 3: ☐ Registration	fee
☐ Application	ee □ Book fee □ Tutoring fee □ Enrollment fee □ Other (Specify):
Amount Paid: \$	Payment Date:
Payment Method: ☐ Payl	Pal □ Point of Sale □ Web Based/Phone □ Square



C)	Textbooks	 Required By 	y Private School
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Textbook:	Amount Paid: \$
Textbook:	Amount Paid: \$
Textbook:	Amount Paid: \$
Textbook:	Amount Paid: \$
D) Uniform (Required By and Purchased Through School)	
Total Payment Amount: \$	
2) Tutoring Services – Academic Subjects, including Music and	l Art
A) Tutor 1	
Payment Date:	
Payment Method: ☐ PayPal ☐ Point of Sale	☐ Web Based/Phone ☐ Square
Payment Facility:	Payment Amount: \$
Name of Tutor:	Subject:
Credential Type: ☐ Bachelor's Degree or hig☐ State Substitute Teaching	•
\Box Checking this box assures that I have verif	ied credentials and documents are attached
B) Tutor 2	
Payment Date:	
Payment Method: ☐ PayPal ☐ Point of Sale	☐ Web Based/Phone ☐ Square
Payment Facility:	Payment Amount: \$
Name of Tutor:	Subject:
Credential Type: ☐ Bachelor's Degree or hig☐ State Substitute Teaching	•
	ied credentials and documents are attached
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Use Addendum sheet to add additional Academic Tutors

Continue on next page for Extra-Curricular Tutors



Extra-Curricular Tutors			
Payment Date:			
Payment Method: ☐ PayPal	☐ Point of Sale	☐ Web Based/Phone ☐ :	Square
Payment Facility:		Payment Amount: \$	
Name of Tutor:		Subject:	
		gher State Teaching/Sub	stitute Teaching Certifica
_	t-specific Credent		
☐ Checking this box assure	s that I have veri	ified credentials and document	s are attached
	ndum sheet to a	add additional Extra-Curricular	tutors
rricula			
Curriculum Order 1			
Payment Date: Total	Payment Amoun	t: \$ Vendor:	
Payment Method: PayPal	☐ Point of Sale	☐ Web Based/Phone	□ Square
•		·	•
a) Curriculum, as listed on Invoice	1		1
Name of Curriculum	Grade Lev	vel Subject	Price \$
			\$
			\$
			\$
			\$
			\$
b) Supplemental Material			
Required by (Curriculum Nan	ne)	Name of Item	Price
			\$
			\$
			\$



Payment Date:	To	otal Payment Am	ount: \$	Vendor:		
Payment Method:	□ PayPal	☐ Point of Sa	le	d/Phone	□ Square	
a) Curriculum, as liste	d on Invoice	:				
Name of Cu	rriculum	Grade	e Level	Subject		F
						\$
						\$
						\$
						\$
						\$
						\$
						\$
			-			1
b) Supplemental Mate		0/2:22.0	Marina	af Itama	ı	Duine
Required by	Curriculum	Name)	Name	of Item	\$	Price
					\$	
					\$	
					\$	
c) Taxes and Shipping	: Payment A	\mount: \$		_		
	U	Jse Addendum sl	neet to add addition	nal Curricula		
Online Private Program						
_						
A) Tuition			Tuition Baid. \$		Daymont [)ata:
Program Name:			Tuition Paid: \$. Puyment L	——————————————————————————————————————
B) Fees (as shown on Invo	ice)					
Name of Fee:			Tuition Paid: \$		Payment D	ate:
	urriculum					
C) Required Textbooks/C						
C) Required Textbooks/C Textbook/Curriculum	1 Name:			Amount	Paid: \$	
				Amount Amount		
Textbook/Curriculum	2 Name:				Paid: \$	



Payment Date:		Te	est Date:	
			☐ Web Based/Phone	□ Square
Payment Facility:	·	P	ayment Amount: \$	
Test Name.	☐ Stanford Ac	hievement Test (SAT)	□ California Achie □ Iowa Test of Bas P) □ Metropolitan Ac □ Other (Specify)	sic Skills (ITBS)
Post-Secondary Institu	ution (University	y, College, Trade or Vo	ocational School in Arizon	a)
A) Tuition Institution Name	:		Tuition Paid: \$	Payment Date:
B) Fees				
Name of Fee 1:			Amount Paid: \$	
			Amoun	t Pala: 🤰
Name of Fee 2:				t Paid: \$
Name of Fee 2:	d by Post-Secon	ndary Institution		-
Name of Fee 2:	•	idary Institution		t Paid: \$
Name of Fee 2: C) Textbooks Require	2:	idary Institution	Amoun	t Paid: \$ Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name	· ·	idary Institution	Amoun Amount	Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name Textbook 2 Name	2:	idary Institution	Amoun Amount Amount	t Paid: \$ Paid: \$ Paid: \$ Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name Textbook 2 Name Textbook 3 Name	2:	dary Institution	Amoun Amount Amount Amount	t Paid: \$ Paid: \$ Paid: \$ Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name Textbook 2 Name Textbook 3 Name Textbook 4 Name	2:	idary Institution	Amount Amount Amount Amount	t Paid: \$ Paid: \$ Paid: \$ Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name Textbook 2 Name Textbook 3 Name Textbook 4 Name D) Placement / Admis	e: e: e: ssions Test	idary Institution	Amount Amount Amount Amount	Paid: \$ Paid: \$ Paid: \$ Paid: \$ Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name Textbook 2 Name Textbook 3 Name Textbook 4 Name D) Placement / Admis	e: e: e: ssions Test	idary Institution	Amount Amount Amount Amount	Paid: \$ Paid: \$ Paid: \$ Paid: \$ Paid: \$
Name of Fee 2: C) Textbooks Require Textbook 1 Name Textbook 2 Name Textbook 3 Name Textbook 4 Name Textbook 4 Name Text Name: Amount Paid: \$	e: e: e: ssions Test	idary Institution	Amount Amount Amount Amount	Paid: \$ Paid: \$ Paid: \$ Paid: \$ Paid: \$ Paid: \$

Applicant Parent must be the Responsible Party on Account

Please attach Account Overview and Account Statements with submission



8) Bank Fee for ESA Account

Daymant Data:		
Payment Date:	Payment Amount: \$	
Fee Type: ☐ Replacement Ca	rd (Lost or Stolen) Expedited Service Fee	
b) Bank Fee 2		
Payment Date:	Payment Amount: \$	
Fee Type: ☐ Replacement Ca	ard (Lost or Stolen)	
9) Services from a Public School		
Note: Student cannot be enrolled in p	public school; services must be paid-services from a pu	ıblic school within Arizona
Payment Date:	Payment Amount: \$	
Payment Method: ☐ PayPal	☐ Point of Sale ☐ Web Based/Phone	□ Square
District:	School:	
Course Title:	Subject:	Grade Level:
PENDITURE – ATTESTATION FORM		
	5-2402 & 15-2403, as the ESA contract holder, I co	ertify that:
 All funds have been spent for the Empowerment Scholarship Agree I understand that the Arizona Depart a. Suspend an ESA account or rer Require repayment of missper 	lawful benefit of the qualified student as author ement. partment of Education is authorized to audit all e move a parent for misspending; nt funds before releasing additional monies;	ized in Section 3 of the xpenditures and may:
 All funds have been spent for the Empowerment Scholarship Agree I understand that the Arizona Deparation and ESA account or rerest. Require repayment of misspers. Refer gross misspending for fujudgment or criminal indictme 	lawful benefit of the qualified student as author ment. partment of Education is authorized to audit all emove a parent for misspending; at funds before releasing additional monies; arther investigation to the Attorney Generals' Offent.	ized in Section 3 of the xpenditures and may:
 All funds have been spent for the Empowerment Scholarship Agree I understand that the Arizona Deparation and ESA account or rerest. Require repayment of misspers. Refer gross misspending for fujudgment or criminal indictme 	lawful benefit of the qualified student as author ement. partment of Education is authorized to audit all e move a parent for misspending; nt funds before releasing additional monies; urther investigation to the Attorney Generals' Off	ized in Section 3 of the xpenditures and may:

Send completed Expense Report and required documents to:

Mail Mail

Email:

Arizona Department of Education Attn: ESA 1535 W. Jefferson Street Bin #41 Phoenix, Arizona 85007

esareports@azed.gov