**Applicant/Legal Guardian and Student Details (print in blue or black ink):**

**Quarter:**

|  |  |
| --- | --- |
| Student First Legal Name | Student Legal Last Name |
| Applicant/Legal Guardian First Name | Applicant/Legal Guardian Last Name |

**Expenses (If not Applicable, Leave Blank)**

**1)** **Private School Expenses**

**A) Tuition**

*School Name***:** *Tuition Paid***: $** *Payment Date***:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Payment Method:*  | * PayPal
 | * Point of Sale
 | * Web Based/Phone
 | * Square
 |
| *Payment Frequency:*  | * Weekly
 | * Bi-Weekly
 | * Monthly
 | * Semester
 | * Quarterly
 | * Annual
 |

1. **Fees**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Fee Type 1:*  | * Registration fee
 | * Facility fee
 | * Lab fee
 | * Credit Card Processing fee
 |
| * Activity Fee
 | * Application fee
 | * Book fee
 | * Tutoring fee
 | * Enrollment fee
 |
| * Other (Specify):
 |

*Amount Paid***: $** *Payment Date***:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Payment Method:*  | * PayPal
 | * Point of Sale
 | * Web Based/Phone
 | * Square
 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Fee Type 2:*  | * Registration fee
 | * Facility fee
 | * Lab fee
 | * Credit Card Processing fee
 |
|  | * Application fee
 | * Book fee
 | * Tutoring fee
 | * Enrollment fee
 |
| * Other (Specify):
 |

*Amount Paid***: $** *Payment Date***:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Payment Method:*  | * PayPal
 | * Point of Sale
 | * Web Based/Phone
 | * Square
 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Fee Type 3:*  | * Registration fee
 | * Facility fee
 | * Lab fee
 | * Credit Card Processing fee
 |
|  | * Application fee
 | * Book fee
 | * Tutoring fee
 | * Enrollment fee
 |
| * Other (Specify):
 |

*Amount Paid***: $** *Payment Date***:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Payment Method:*  | * PayPal
 | * Point of Sale
 | * Web Based/Phone
 | * Square
 |

**Continued on Next Page**

1. **Textbooks - Required By Private School**

|  |  |
| --- | --- |
| *Textbook:* | *Amount Paid:* **$** |
| *Textbook:* | *Amount Paid:* **$** |
| *Textbook:* | *Amount Paid:* **$** |
| *Textbook:* | *Amount Paid:* **$** |
| *Textbook:* | *Amount Paid:* **$** |
| *Textbook:* | *Amount Paid:* **$** |

1. **Uniform (Required By and Purchased Through School)**

|  |
| --- |
| *Total Payment Amount:* **$** |

**EXPENDITURE – ATTESTATION FORM**

Pursuant to Arizona Revised *S*tatutes § 15-2402 & 15-2403, as the ESA contract holder, I certify that:

1. All funds have been spent for the lawful benefit of the qualified student as authorized in Section 3 of the Empowerment Scholarship Agreement.
2. I understand that the Arizona Department of Education is authorized to audit all expenditures and may:
3. Suspend an ESA account or remove a parent for misspending;
4. Require repayment of misspent funds before releasing additional monies;
5. Refer gross misspending for further investigation to the Attorney Generals’ Office that may result in a civil judgment or criminal indictment.
6. I understand it is a violation of ESA policy to retain the services of a family member or ESA card holder as a therapist, tutor or aide.

|  |
| --- |
| ESA Application #:  |

|  |  |  |
| --- | --- | --- |
| Parent Name (*Print*)  | Signature | Date |

**Please be aware that submission is not considered complete without all supporting documentation (receipts, invoices, credentials, etc.)**

**Send completed Expense Report and required documents to:**

|  |  |
| --- | --- |
| http://cdn.mysitemyway.com/etc-mysitemyway/icons/legacy-previews/icons-256/glossy-space-icons-business/081340-glossy-space-icon-business-mailbox.png***Mail*****Arizona Department of EducationAttn: ESA1535 W. Jefferson Street Bin #41Phoenix, Arizona 85007** | https://utamberg.files.wordpress.com/2012/02/email-icon.png***Email:*****esa@azed.gov** |