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EMPOWERMENT SCHOLARSHIP ACCOUNT 2019-2020 SCHOOL YEAR APPLICATION

riease c	choose <u>ONE</u> of the following eligibility criteria that applies to your student.
	Student with a disability with current MET report, IEP, or 504 plan from an Arizona public school (1-12 grade)
	Student is an incoming Kindergartener with a disability (will be 5 years old on or before September 1 of the application year, but NOT 6 years old). (Does not need 100 day requirement), and current MET report, IEP, or 504 plan from an Arizona public school.
	Student is an incoming Preschooler with a disability (current MET Report, IEP, or 504 plan from an Arizona public school) and will be 3 or 4 years old on or before September 1 of the application year.
	Student has a sibling currently or previously on the program.
	Student resides (Kindergarteners only) in the boundary of or attends (grades 1-12) a D/F school or district.
	Student is domestically adopted or seeking permanent placement with court documentation stating the child is/was "ward of the court".
	Student is a child of an active duty military parent or guardian currently serving in the Armed Forces (does not need 100 day requirement).
	Student is a child whose parent or guardian was killed while serving in the Armed Forces (does not need 100 day requirement).
	Student resides on an Indian Reservation
	Student's legal guardian is Legally blind, Deaf or Hard of Hearing
	Student has previously participated in the ESA Program (does not need 100 day requirement)
☐ Yes For whice ☐ Cur	AND the student reside in Arizona? No ch school year are you applying? rent School Year 2019-2020 is currently attending/or has attended (check any that apply)
	An Arizona public or charter school for the first 100 days of the school year, prior to the school year for which you are submitting an ESA application.
	An Arizona Online Instruction (AOI) public or charter school for the required hours, prior to the school year for which you are submitting an ESA application. Required hours: 1 st -3 rd Grade-400 hours of logged instruction, 4 th -6 th Grade-500 hours of logged instruction, 7 th -8 th -550 hours of logged instruction, 9 th -12 th Grade-500 hours of logged instruction.
	Student is eligible to attend or is attending Kindergarten (was 5 years old on or before September 1 of the application year, but not 6 years old).
	Student received a School Tuition Organization (STO) for Displaced and Disabled or Lexie's Law and had 90 membership days (or one semester of enrollment) prior to the school year for which you are submitting an ESA Application.
	None of the above.

First Name		Last Name			
Date of Birth		Current Grade Level	Current Grade Level		
Details of Parent/Legal Guar	dian (print in blue or b	olack ink):			
First Name		Last Name	Last Name		
Date of Birth		Primary Language	Primary Language		
Telephone (Home)		Social Security # or TIN:			
Email Address		Preferred Method of Co	Preferred Method of Contact ☐ Email ☐ Postal Mail		
Physical Address (PO Box is no	t a valid Physical Address)			
City	County		Zip Code		
Mailing Address or PO Box [Same as Above				
City	County		Zip Code		
Required Documentation					
Copy of birth certificate:					
			ng on an Indian Reservation, provide		
☐ Real estate deed or mortgage documents.					
☐ Property tax bill					
☐ Residential lease or rental agreement					
☐ Water, electric, gas, cable, or landline phone bill(issued within the last 60 days)					
☐ W-2 Statement					
☐ Valid Arizona driver's	license with current ph	nysical address (No PO Bo	ox) (issued within the last 60 days)		
☐ Identification or state	ement issued by a recog	gnized Indian tribe that v	erifies an Arizona Physical Address.		

5. Details of Student (print in blue or black ink):

foll	owing:					
	Adoption Certificate		Letter from DES Case Worker/Manager			
	Court documents that state the Student was a ward of the court					
	Court documents stating Student is a ward of the court and shows plans for adoption					
	Court paperwork documenting minutes of hearing					
b. If N	Ailitary Provide ALL of the following:					
	Letter from your commanding officer (To include: name of active duty service member, student listed as dependent, date of separation, location of duty station, current military status, and military branch)					
	Current Military Orders					
	Note: If parent was killed in the line of duty while serving, you must provide documentation					
 c. If applying under Sibling: Copy of Sibling birth certificate is enclosed showing Parent/Legal Guardian is the same: Yes No d. If applying under Legally Blind, Deaf or Hard of hearing parent: ONE the following documents is enclosed (select one): 						
	Completed Confirmation of Deaf or Hard of Hearing form					
	Completed Confirmation of Legal Blindness Form					
e. If applying under student with disabilities- Copy of ONE the following documents, <u>not expired</u> , is enclosed (select one) *If you are previous ESA recipient that received funding under the Special Needs category this documentation is still required and cannot be from a Private School:						
	Individual Education Plan (IEP) from a public school, district or charter. Only 2 parts are required:					
	Student Information page including the sign Eligibility page (this is the page that shows t	•	age that shows the primary category of need. ent's category for special education)			
	MET/Evaluation Report from a public schoo Student Information page, including the sign Eligibility page (this is the page that shows t	l, distric nature p he stude	t or charter. Only 2 parts are required: age, that shows the primary category of need. ent's category for special education)			
	504 Plan from a public school, district or charter and signature page.					

a. If applying under WARD OF COURT (Document must state child is/was "ward of court"): Submit ONE of the

PLEASE	VERIFY THAT YOU HAVE READ AND UN	DEKSIC	JOD THE FOLLOWING:		
	I certify the information provided in this application, including any supporting documentation is truthful and accurate.				
	I understand that, if my child is awarded ESA, I am required to withdraw him or her from public/charter school when I have signed and returned my contract to ESA.				
	I understand that, if my child is awarded ESA, I may not receive a School Tuition Organization (STO) or tax credit based scholarship concurrently with an ESA award.				
	I certify that I am the responsible party, and hold the necessary authority, to make all educational decisions for the applicant student.				
Sign an	d Date Below:				
Signature		Date			
•	eed to add an additional parent/guardiate or legal guardian paperwork:	an, plea	ase enter their name here (they <u>must</u> be listed on the birt		
First name			Last Name		
	Email required docu	ıments	and copies to: ESA@azed.gov		
			or		

Mail completed application and required documents to:

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