



**TO BE SIGNED BY A PARENT OR
GUARDIAN AND GIVEN TO THE
SCHOOL OR STO TO BE FILLED OUT.**

PREVIOUS STO AWARD VERIFICATION FORM

If your child has received a previous scholarship, please verify by one of the following:

- A copy of the letter awarding your scholarship
- Have the awarding School Tuition Organization (STO) complete this form
- Have the school that received the award complete this form

I give the awarding STO or receiving school listed permission to release information about my child's scholarship history.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

Student Name: _____

Awarding STO: _____

School: _____

Type & school year of award(s) made to student:

***List a prior year first. If awards were not made in a prior year, list awards for the current school year.**

Original Individual _____ (school year)

Switcher/ PLUS Individual _____ (school year)

Low-Income Corporate _____ (school year)

Disabled-Displaced Corporate _____ (school year)

To my knowledge, this student has continued to be enrolled in a private school since receiving the award(s).

Comments: _____

Name of individual completing form: _____

Title of individual completing form: _____

Signature: _____ Date: _____

This form can be uploaded when completing the application or sent to info@apesf.org.