



**TO BE GIVEN TO THE SCHOOL OR
AWARDING STO TO BE FILLED OUT.**

PRIOR 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: _____

TO BE FILLED OUT BY SCHOOL OFFICIAL OR STO REPRESENTATIVE

Student Name: _____

Awarding STO: _____

School: _____

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

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

Original _____ (school year)

Switcher/ Overflow/ PLUS _____ (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.

**ARIZONA PRIVATE EDUCATION
SCHOLARSHIP FUND, INC.**

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