



### **Previous Award Verification**

This information must be completed **by the School Tuition Organization (STO)** that your student received a scholarship from or **by the Private School** that received the scholarship. If you have already had this form completed for another STO, MCF may accept that copy in place of this form. This form must be submitted with your application.

ALL INFORMATION REQUESTED BELOW IF REQUIRED.

Parent's Name:
Student's Name:
Name of the school where the award was sent:
Please check all that apply (award must be in a prior school year):  <input type="checkbox"/> Awarded Original/Individual Scholarship (A.R.S. 43-1089) STO: _____ School Year: _____  <input type="checkbox"/> Awarded PLUS/Switcher Scholarship (A.R.S. 43-1089.03) STO: _____ School Year: _____  <input type="checkbox"/> Awarded Low-Income Corporate Scholarship (A.R.S. 43-1183) STO: _____ School Year: _____  <input type="checkbox"/> Awarded Disabled/Displaced Scholarship (A.R.S. 43-1184) STO: _____ School Year: _____
This student has continued to attend a qualified private school. (circle one) <p style="text-align: center;">YES      NO</p>
Printed Name: _____ Title: _____
Signature: _____ Date: _____