



## CORPORATE SCHOLARSHIP ELIGIBILITY

### YOUR CHILD IS ELIGIBLE IF:

1. The child is starting into Kindergarten at a qualified private school.  
**AND**
2. The family's income does not exceed 185% of the income limit required to qualify for reduced price lunches under the national school lunch and child nutrition acts. *\*See chart*  
**OR**
1. The child attended a public or charter school as a full-time student for at least the first one hundred days of the prior year and is transferring to a qualified private school as a full-time student.  
**AND**
2. The family's income does not exceed 185% of the income limit required to qualify for reduced price lunches under the national school lunch and child nutrition acts. *\*See chart*

Federal Reduced Lunch Guideline 09-10 School Year		ARIZONA CORPORATE TAX CREDIT GUIDELINE
Household Size	Annual Gross Income	Annual Gross Income (185% of column 2)
1	\$20,036.00	<b>\$37,066.60</b>
2	\$26,955.00	<b>\$49,866.75</b>
3	\$33,874.00	<b>\$62,666.90</b>
4	\$40,793.00	<b>\$75,467.05</b>
5	\$47,712.00	<b>\$88,267.20</b>
6	\$54,631.00	<b>\$101,067.35</b>
7	\$61,550.00	<b>\$113,867.50</b>
8	\$68,469.00	<b>\$126,667.65</b>
Each Additional Person	\$6,919.00	<b>\$12,800.15</b>

*One of the qualifications for a child to receive "Educational Scholarships and Tuition Grants" (ESTG) under the corporate tuition tax credit law is an income limit for the child's family. The ESTG recipient must come from a family whose income does not exceed 185% of the maximum allowed to qualify for a "reduced price lunch" as defined by the National School Lunch and Nutrition Acts.*

*The chart above lists the national reduced price lunch guidelines and then the corresponding corporate tuition tax credit guidelines (Column 2 x 185%).*

**APPLICATION DEADLINE JUNE 30<sup>TH</sup>**  
**REVIEW COMMITTEE MEETS LATE JULY**  
**SCHOOLS AND PARENTS NOTIFIED BY MID-AUGUST**



# SCHOOL CHOICE ARIZONA, INC.

2241 E. Pecos Road, Suite 3 Chandler, AZ 85225 Phone: 480-722-7502 Fax: 480-820-2027  
www.schoolchoicearizona.org

## 2010/11 SCHOLARSHIP APPLICATION

### STUDENT INFORMATION FORM

*Please fill out one Student Information Form for each eligible student.*

*Please mail or fax the completed application to School Choice Arizona, Inc. 2241 E. Pecos Rd. Suite 3, Chandler, AZ 85225, Fax # (480) 820-2027.*

STUDENT NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ PHONE #: (\_\_\_\_)\_\_\_\_\_

PARENT/GUARDIAN NAME(S): \_\_\_\_\_  
FIRST MIDDLE LAST

ADDRESS: \_\_\_\_\_  
STREET ADDRESS  
CITY STATE ZIP

Parent's Email: \_\_\_\_\_

GRADE OF CHILD FOR 10/11 SCHOOL YEAR (PLEASE CIRCLE GRADE)

**K\*** 1<sup>ST</sup> 2<sup>ND</sup> 3<sup>RD</sup> 4<sup>TH</sup> 5<sup>TH</sup> 6<sup>TH</sup> 7<sup>TH</sup> 8<sup>TH</sup> 9<sup>TH</sup> 10<sup>TH</sup> 11<sup>TH</sup> 12<sup>TH</sup>

*\*SKIP THIS BOX IF THE CHILD IS ENTERING INTO KINDERGARTEN*

**DID THE ABOVE NAMED CHILD RECEIVE A CORPORATE SCHOLARSHIP/GRANT FROM ANY ORGANIZATION LAST SCHOOL YEAR?** \_\_\_\_\_ **WHO?** \_\_\_\_\_

**NAME OF PUBLIC SCHOOL PREVIOUSLY ATTENDED:**

NAME OF PUBLIC SCHOOL MOST RECENT SCHOOL YEAR ATTENDED CITY

*I hereby certify that my child has attended the above **public school or charter school** for at least the first one hundred days of the last school year.*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
PARENT SIGNATURE DATE

NAME OF QUALIFIED PRIVATE SCHOOL YOUR CHILD WILL BE ATTENDING:

NAME OF SCHOOL CITY

