

# BEST STUDENT FUND

## APPLICATION FOR TUITION GRANT

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Best Student Fund provides lower and middle-income families with tuition grants. These grants enable Arizona parents to enroll their Kindergarten through 12<sup>th</sup> grade students in the tuition based school. Best Student Fund is a school tuition organization as defined by Arizona statute.

### To Apply

A parent or guardian must complete this application and include a copy of your Federal Income tax filing and return it to Best Student Fund. Requests will be processed in the order received.

Please indicate by a check mark ✓ that your family meets the following eligibility requirements for a Best Student Fund tuition grant:

- My recipient child or children live in and attend school in Arizona.
- My recipient child or children have entered or will be entering Kindergarten through 12<sup>th</sup> grade in the fall of 2019 and spring of 2020 (2019/2020 school year).
- I understand that I need to submit a copy of my previous year's Federal Income tax filing along with this application to verify my household income.

Based on the information you provide, Best Student Fund will determine if your total household income is below the maximum income allowed to be eligibility for this grant.

### Parent/Guardian & Student Information: (please print clearly)

Parent/Guardian name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Work/Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Name of Child	Grade level (2019/20)	Private School Name (2019-2020)	Name of Public School Attended Last Year (2108-2019)

# Total Household Gross Income - You must tell us how much and how often

**Column 1 – Full Name:** List **EVERYONE** living in your household (related or any other person). Attach another sheet if necessary.

**Column 2 – Gross income:** Next to each person’s name list each type of income received during the last tax year and how often it was received.

**Earnings from work before deductions:** List gross income for each person and how often it was received.

**Welfare, child support, alimony:** List how much and how often it was received (do not include food stamps).

**Pensions, retirement, social security, SSI, VA:** List how much including supplemental social security income (SSI), Veteran’s benefits (VA), disability and how often it was received.

**All Other Income:** List how much including unemployment compensation, worker’s compensation, rental income, dividend income, cash withdrawn from savings, investment income, regular contributions from persons not living in the household and **ALL OTHER INCOME**.

**Column 3 – Check if NO Income:** If the person does not have any income then please check the box.

1. Full Name List <b>everyone</b> in household	2. Gross income and how often it was received <i>Example: \$100/monthly \$100/twice a month \$100/every other week \$100/weekly</i>				3. Check if NO Income
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, social security, SSI, VA	All Other Income	
<i>(Example) John Smith</i>	\$ <u>200/weekly</u>	\$ <u>150/twice a month</u>	\$ <u>100/monthly</u>	\$ <u> / </u>	<input type="checkbox"/>
	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	<input type="checkbox"/>
	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	<input type="checkbox"/>
	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	<input type="checkbox"/>
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	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	<input type="checkbox"/>
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	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	<input type="checkbox"/>
FOR OFFICE USE ONLY	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	\$ <u> / </u>	

Total number of people living in your household \_\_\_\_\_  
*Include yourself, spouse, children, & any other person living with you*

**I certify (promise) that all information on this application is true and that all income is reported.**

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Mail Completed Application to:**  
**Best Student Fund**  
**P.O. Box 6226**  
**Chandler, AZ 85246**

A school tuition organization cannot award, restrict, or reserve scholarships solely on the basis of donor recommendation. A taxpayer may not claim a tax credit if the taxpayer agrees to swap donations with another taxpayer to benefit either taxpayer’s own dependent.