



Arizona Tuition Organization

Public School Attendance Verification Form for PLUS/Overflow Eligibility

A student is eligible to receive a PLUS/Overflow Tax Credit Award if “The student attended a public school in Arizona as a full-time student (K-12) for at least 90 days or one full semester of the prior fiscal year and then transferred from a public school to a qualified private school.”

Parent/Guardian Directions: The purpose of this form is to verify that your student attended a public school in the school year prior to attending the private school. This information must be completed by a public school representative, not the parent. If your student attended more than one public school in the year prior to attending the private school, please submit multiple forms to AZTO from each public school. It is the parent/guardian’s responsibility to coordinate the completion and submission of this form to AZTO. The parent must also submit an AZTO Application for the named student, go to www.azto.org to apply.

School Directions: Please provide the Arizona public school name, district, the student’s start and end date of the *prior and current school year’s attendance* for these academic years (if applicable). All dates must specify the month, day, and year. Once the form is completed, please return it to the requesting parent/guardian or submit it to AZTO directly.

Student Name:		
Name of AZ Public School and District:		
PRIOR SCHOOL YEAR (if applicable)		
Student’s Start Date of PRIOR School Year (if applicable): <i>mm/dd/yy</i>	Student’s Last Day of PRIOR School Year (if applicable): <i>mm/dd/yy</i>	
Student was enrolled for one full semester of the PRIOR school year. Yes <input type="checkbox"/> No <input type="checkbox"/>	PRIOR Grade:	
If NO, student was enrolled for _____ days of the school year.		
CURRENT SCHOOL YEAR (if applicable)		
Student’s Start Date of CURRENT School Year (if applicable): <i>mm/dd/yy</i>	Student’s Last Day of CURRENT School Year (if applicable): <i>mm/dd/yy</i>	
Student was enrolled for one full semester of the CURRENT school year. Yes <input type="checkbox"/> No <input type="checkbox"/>	CURRENT Grade:	
If NO, student was enrolled for _____ days of the school year.		
Name of School Representative Completing Form:	Title:	
Signature of School Representative:	Date:	

Please submit completed Public School Verification Form to:

Email: apply@azto.org

Mail: Arizona Tuition Organization (AZTO)
PO Box 11900
Prescott, AZ 86304