EARLY ENROLLMENT

EDUCATION SAVINGS ACCOUNT APPLICATION (ESA)

Internal Use Only	DOE State ID #	
	STO #	Batch #
	Received Date:	

Reset Form

School District Student ID# (Required):		
Student Name (Last, First):	Current Grade (2014-2015):	Student's Date of Birth:
Physical Address (PO Boxes will not be accepted):	City:	Zip Code:
County (Example: Washoe):	Phone (Include Area Code):	
Mailing Address:	City:	Zip Code:
Applicant Parent Name (Last, First):	Parent E-Mail Address:	

***NOTE*: An e-mail address is required because ALL further official correspondence and documentation will be delivered electronically.**

Do you and your child reside in Nevada?	Yes ☐	No ☐
Is your child under the age of 7 years?	Yes ☐	No ☐
Did the student attend a Nevada public/charter school for 100 school days immediately preceding the date of this application? **NOTE**: ***If you indicate "no" to this question your application will not be accepted***	Yes ☐	No ☐
Was your child a full time student during the required 100 school days immediately preceding the date of this application?	Yes ☐	No ☐
During the 100 school days immediately preceding the date of this application did your child miss 15 or more consecutive school days (e.g., illness, special circumstances)? If yes, please attach a detailed explanation of the extended absence.	Yes ☐	No ☐

Please list the Nevada Public/Charter School(s) and School Code that your child attended for 100 consecutive school days immediately preceding the date of this application.	
School #1	**School Code (Required):**
School District/Charter Sponsor:	Dates of Attendance: (mm/dd/yyyy) _____/_____/_____ ⇨ _____/_____/_____
Name of Public/Charter School:	
School #2	**School Code (Required):**
School District/Charter Sponsor:	Dates of Attendance: (mm/dd/yyyy) _____/_____/_____ ⇨ _____/_____/_____
Name of Public/Charter School:	
If your child attended more than 2 schools during the preceding 100 school days, please attach a separate page listing the school information.	

Reminder: ***If you have more than one child who is eligible for Nevada's ESA Program, an application must be submitted for each child.***

Yes ☐	No ☐	Is your child a pupil with disabilities? (NRS 388.440) *** "Pupil with a Disability Defined":* means (i) with intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; and (ii) who, by reason therof, needs special education and related services..
Yes ☐	No ☐	Is your annual household income within 185% of the federally designated poverty level? (http://aspe.hhs.gov/poverty/15poverty.cfm) If yes, provide proof of Annual Household Income. (copy of last year's tax return (first 2 pages) or a current paystub)

REQUIRED DOCUMENTS (ALL documents must be submitted) *(If you submit original documentation, it **will not** be returned to you.)*	
1. ☐	Copy of the parent's valid (non-expired) Government issued ID
2. ☐	A certified or verified copy of the student's birth certificate AND Proof of legal guardianship (if you're not the biological parent)

AND one of the following to prove residency: **MUST SHOW YOUR CURRENT PHYSICAL ADDRESS**	
1. ☐	Copy of your most current utility bill (applicant parent name and address) OR
2. ☐	Copy of current property tax bill OR rental lease agreement (applicant parent name and address)

I understand that if an ESA is ultimately funded, I am required to withdraw the applicant student from public/charter school prior to the funding of my account. (Upon establishment of your account you will be asked to set a first funding date, at that time a corresponding date of withdrawal will be given.)

Initials_____

I understand that if an ESA is ultimately funded, the monies may only be used for the following expenses:

- Tuition and fees at a school that is a *participating entity** which the child is enrolled;
- Textbooks required for a child who enrolls in a school that is a *participating entity**;
- Tutoring or other teaching services provided by a tutor or tutoring facility that is a *participating entity**;
- Tuition and fees for a program of distance education that is a *participating entity**;
- Fees for any national norm-referenced achievement examination, advanced placement or similar examination or standardized examination required for admission to a college or university;
- If the child is a pupil with a disability, as that term is defined on page 2 (NRS 388.440), fees for any special instruction or special services provided to the child;
- Tuition and fees at an *eligible institution*** that is a *participating entity**;
- Textbooks required for the child at an *eligible institution*** that is a *participating entity* or to receive instruction from any other *participating entity**;
- Transportation required for the child to travel to and from a *participating entity** or any combination of *participating entities** up to but not to exceed $750 per school year; or-
- Purchasing a curriculum or any supplemental materials required to administer the curriculum.

***Participating Entity Defined*:** 1.) a private school that is licensed pursuant to chapter 394 of NRS or exempt from such licensing pursuant to NRS 394.211; 2.) an eligible institution; 3.) a program of distance education that is not offered by a public school or the department, a tutor or tutoring agency or a parent.

****Eligible Institution Defined:*** 1.) a university, state college or community college within the Nevada System of Higher Education; 2.) any other college or university that (a) was originally established in, and is organized under the laws of, this State; (b) is exempt from taxation pursuant to 26 U.S.C. § 501 (c) (3); and (c) is accredited by a regional accrediting agency recognized by the United State Department of Education.

Initials_____

Applicant Parent/Guardian Name (Print):	Today's Date:

Applicant Parent/Guardian Signature:

By signing this, you certify that you have the legal right to direct the education of the child.

NOTE: Please NO Cell Phone Photos.

Mail to:
State of Nevada Treasurer's Office
C/O Grant Hewitt
101 N. Carson Street, Suite 4
Carson City, NV 89701

All applications will be date stamped upon receipt