



2016-2017 STO AFFIDAVIT

The undersigned individual(s) duly swears that he or she did not earn enough income to be required to file a federal and state individual income tax return for the tax period ending December 31, 2015. Therefore, in seeking a tuition grant for (student name) _____ for the upcoming school year, the Parent/Guardian will not require a copy of the federal or state income tax return to verify the household income.

Name of Parent/Guardian(s): _____

_____/_____/_____
Parent Signature Printed Name Date

School Name City

_____/_____/_____
School Administrator Signature* Printed Name Date
*REQUIRED

Return this completed form to PSAS with the completed STO Student Aid Form

Private School Aid Service
P.O. Box 89434
Cleveland, OH 44101-6434