



Application for the Education Savings Account Program

Thank you for your interest in participating in Tennessee’s Education Savings Account Program. Before you begin the application, you will need to compile the following documents. These items must be copied and must accompany this application in order to submit.

1. Proof of income eligibility. You must have one of the following:

- Federal tax return (Form 1040, most recent for 2021)
- Tennessee Assistance for Needy Families (TANF) most recent benefits statement or letter of eligibility

2. Proof of address. You must have two of the following indicating the student is zoned for a school within Memphis-Shelby County Schools, Metro Nashville Public Schools, or the Achievement School District:

- Valid, non-expired driver’s license or state ID
- Property tax receipt (from past year) or signed lease agreement (indicating current lease)
- Utility bill (dated within three months of application)
- Voter registration card
- Affidavit from landlord or owner of current residence (signed within the past 30 days)

Both proofs of address must show the same current address.

To complete this application, you will need to fill in the required fields *and* attach copies of your documents. Do not send original documents.

Families have *two options* in completing this form:

- Option 1: On a computer, type directly into the application before printing and mailing.
- Option 2: Families can print and then handwrite responses before mailing.

Please note no applications will be accepted via email.

Send the complete application with supporting documentation to the following address:

ESA Program c/o TDOE
Andrew Johnson Tower, 10th Floor
710 James Robertson Parkway
Nashville, TN 37243

To begin the student application process, please complete the following form. Print clearly in ink.

Full name of student: _____ Date of birth: _____

Grade entering in fall 2022: _____

Is the student a foster child? Y N

The following information for at least **one parent** is required.

Name of Parent 1: _____

Email: _____ Phone: _____

Social Security Number: _____ Date of birth: _____

Name of Parent 2: _____

Email: _____ Phone: _____

Social Security Number: _____ Date of birth: _____

What kind of school did your child attend for 2021-2022? (Select one of the following.)

Public district school or public charter school in Tennessee

Was your child enrolled for the complete 2021-22 school year? Yes No

What school did your child attend? _____

In what district was the school? _____

Student State ID number: _____

*If no, please
attach a letter
explaining the
child's full school
year attendance*

Public district school or charter school in another state *If the child attended any school in a different state for 2021-2022, include the 21-22 transcript with application*

A private school in Tennessee

Private school in another state *If the child attended any school in a different state for 2021-2022, include the 21-22 transcript with application*

My child was homeschooled in Tennessee

My child was homeschooled in another state *If the child attended any school in a different state for 2021-2022, include the 21-22 transcript with application*

My child is starting kindergarten this year

None of these / More than one / other (please explain)

Family Income

An ESA family must *either* demonstrate income through a tax return or TANF benefits. Both are **not** required.

Does your family receive TANF benefits? Yes No

**If yes, be sure to include a copy of your most recent TANF benefits statement or letter of eligibility with your application.*

If you do not receive TANF benefits, complete the following information. All fields **must** supported by an accompanying Form 1040 tax return.

Please enter income information as it appears on your most recent Federal Tax Return Form 1040.

Name on return: _____

**Note: Parent 1, as listed on page 3 of this application, must be listed on the 1040 Form.*

Year of Return: _____

Total on Line 9: _____

**Note: In order for an application to be complete, this total must be less than two times the free lunch rate as stated below. Additionally, applications without copies of these returns will not be considered valid.*

Income Chart 2022-2023

Household Size	Amount Twice the Federal Free Lunch Income Guideline
2	\$47,606
3	\$59,878
4	\$72,150
5	\$84,422
6	\$96,694
7	\$108,966

Please review the assurances below. By completing and submitting this application, the applicant agrees to the following statements.

Assurances

As a condition of seeking approval as an ESA account holder, the applicant makes the following assurances by signing on page 7:

1. I understand that participation in the ESA program shall have the same effect as a parental refusal to consent to the receipt of services under the federal Individuals with Disabilities Education Act (IDEA - 20 U.S.C. § Section 1414), and I hereby revoke my consent for special education and related services pursuant to IDEA.
2. I understand that upon enrolling in the ESA program, my student's Individualized Education Program (IEP) will no longer be valid, and my student will have no individual entitlement to a free appropriate public education (FAPE) from the public school district, including special education and related services, as long as the student is participating in the ESA program.
3. I understand that the department uses Social Security Numbers to check identity, employment and income data, and other computer and government records. Income includes, but is not limited to, employment, self-employment, alimony, child support, disability benefits, Social Security/SSI, Worker's Compensation, unemployment benefits, pensions, stipends, and interest income.
4. I understand that if the number of program applications received by the department from eligible students exceeds the maximum number of students that may participate in the program for that school year, then the department will conduct an enrollment lottery process.
5. I understand that an awarded ESA is dependent upon proof of enrollment in a private school. I agree that prior to the first disbursement of ESA funds, I will provide proof of enrollment in a Category I, II, or III private school. I understand that no funds shall be disbursed to an ESA account without proof of enrollment in a Category I, II, or III private school.
6. I agree to release the public school district in which the student resides and the school for which the student is zoned to attend from all obligations to educate the student during the time the student is enrolled in the program.
7. I agree not to enroll the participating student in a public school during the time the student is enrolled in the ESA program.
8. I agree not to enroll the participating student in the Individualized Education Account (IEA) program during the time the student is enrolled in the ESA program.

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9. I understand that by signing this, I certify that I have the legal right and responsibility to direct the education of the student.
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10. I agree to ensure the provision of an education for the participating student that satisfies the compulsory school attendance requirement provided in T.C.A. § 49-6-3001(c)(1) through enrollment in a State Board approved Category I, II, or III private school.
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11. I agree to comply with the requirement that participating students in grades three through eleven (3-11) participate in the Tennessee comprehensive assessment program (TCAP) tests for math and English language arts each year of enrollment in the program.
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12. I understand that if the ESA is awarded, the ESA funds may only be used for the expenses listed in ESA Program law (T.C.A. § 49-6-2601, *et seq.*), Rules of the State Board of Education Chapter 0520-01-16, Tennessee Department of Education ESA Program Procedures, and ESA Parent Handbook. I understand that these expenses include: tuition or fees at a participating school; required school uniforms; required textbooks; tuition and fees for summer education programs and specialized after-school education programs, as approved by the Department; tutoring services provided by an individual who meets the requirements set by the Department; tuition and fees at an eligible postsecondary institution; transportation to and from a participating school or education provider by a fee-for-service transportation service; textbooks required by an eligible postsecondary institution; fees for early postsecondary opportunity courses, exams, or exams related to college admission; educational therapies or services for participating students provided by a Department-approved therapist; and computer hardware, technological devices, or other technology fees approved by the department, IF the technology is used for educational needs, is purchased at fair market value, and is purchased through a participating school, private school, or provider.
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13. I understand that I shall obtain pre-approval for tuition and fees, computer hardware or other technological devices, tutoring services, educational therapy services, summer education programs and specialized after-school education programs, and any other expenses identified by the Department. I further understand that if pre-approval is not obtained, the expense may be deemed an unapproved expenditure.
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14. I understand that all payments of ESA funds will be electronic bank payments to the private school and providers who qualify as eligible for ESA expenses.
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15. I understand that all qualifying purchases must be approved, and I understand that unapproved expenses may not be reimbursed.
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16. I understand that failure to submit a complete expense report and receipts by the deadline may result in termination from the ESA Program.
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17. I understand that if a participating student enrolls in the ESA program for less than an entire school year, the ESA amount for that school year shall be reduced on a prorated basis.
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18. I understand that if I move or relocate outside of Shelby or Davidson Counties, I must notify the participating school and the Department of Education.
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19. I understand that if I misuse, do not report, and/or fraudulently spend ESA funding, I will be responsible for repaying those funds to the State Treasurer, or the Department may withdraw funds from the ESA account or withhold funds from future ESA payments. If the student has exited the program, and there are not enough funds remaining in the ESA account to cover the amount of the misspent funds, the account holder will need to repay the funds to the state following the process in the ESA Parent Handbook.
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20. I understand that if I misuse, fail to report, and/or fraudulently spend ESA funding, my student may be immediately removed from the ESA program, the student's ESA account may be closed, and all funds remaining in the account will be forfeited. Cases of fraud may also be referred to the State Comptroller's Office or the State Attorney General's Office.
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21. I understand that use of ESA funds must be for the sole benefit of the participating student for which the ESA account is established. Any services, resources, and/or equipment purchased using ESA funds shall only be used by the participating student whose ESA paid for said services, resources, and/or equipment.
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22. I understand that it is a conflict of interest and is considered a misuse of ESA funds and against ESA program rules and procedures for a family member of a participating student, including stepparent, or member of an eligible student's household to derive any financial benefit from the ESA program.
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23. I understand that it is a conflict of interest and against ESA program rules and procedures for a family member of a participating student, including stepparent, or a member of a participating student's household to provide a professional recommendation or approval for a service or for the use of computer hardware or other technological device for the participating student. I further understand that it is also a conflict of interest and against ESA program rules and procedures for a family member of a participating student, including stepparent, or a member of a participating student's household to directly provide any recommended or approved service or computer hardware or other technological device to the participating student.
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24. I understand that in order for students to continue in the ESA program, I shall annually renew the ESA by following the procedures posted on the Department's website.
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25. I acknowledge that a participating student may return to the public school district at any time after enrolling in the program, and upon enrollment in a Local Education Agency (LEA), the student's participation in the program shall be terminated.

26. I understand that if a student enrolls in an LEA, the parent of a participating student or the participating student who has attained the age of majority (age 18) shall notify the Department in accordance with the procedures and timeline set by the Department.

I, the applicant for participation in the state of Tennessee's Education Savings Account program, certify the information provided in this form, including any supporting documentation is truthful and accurate. I further understand that any false statements or documentation may result in the student's account being frozen, the student being removed from the ESA Program, closure of the student's ESA account, and/or forfeiture of all funds remaining in the account. I further understand that if any false statements or documentation are provided, the Department may prohibit the student and/or parent/guardian from enrolling in the ESA program and/or being an ESA account holder in the future.

Name: _____ Date: _____

I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above assurances.

Upon signing, review the checklist on the next page and send the **complete application** (all pages) **with supporting documentation** to the following address:

ESA Program c/o TDOE
Andrew Johnson Tower, 10th Floor
710 James Robertson Parkway
Nashville, TN 37243

Completion Checklist

- Application completed in ink** (pages 2, 3, and 7 complete and signed)
- Supporting documents** as listed in the table below. At least **three supporting documents are required**.
- If the child did not attend the same school throughout the 2021-22 school year:** include a letter with dates, schools, and locations
- If the child attended school in a state other than Tennessee in 2021-22,** include the child's 21-22 transcript with the application
- If the child is a foster child:** include supporting documentation such as a placement contract
- Any additional documentation** for unique circumstances. Please email ESA.Questions@tn.gov or leave a message at 615-741-9360 for guidance with unique circumstances.
- Envelope with proper postage addressed to**

ESA Program c/o TDOE
Andrew Johnson Tower, 10th Floor
710 James Robertson Parkway
Nashville, TN 37243

Required Documents

In order for an application to be considered, **copies** of the following required documents **must** be included with the application.

- Proof of income eligibility.** You must have **one** of the following:
 - Federal tax return (Form 1040, most recent for 2021)
 - Tennessee Assistance for Needy Families (TANF) most recent benefits statement or letter of eligibility

- Proof of address.** You must have **two** of the following indicating the student is zoned for a school within Memphis-Shelby County Schools, Metro Nashville Public Schools, or the Achievement School District:
 - Valid, non-expired driver's license or state ID
 - Property tax receipt (from past year) or signed lease agreement (indicating current lease)
 - Utility bill (dated within three months of application)
 - Voter registration card
 - Affidavit from landlord or owner of current residence (signed within the past 30 days)

Both proofs of address must show the same current address.

The department may request additional copies of documentation after receipt of application.

Questions? Please email ESA.Questions@tn.gov or leave a message at 615-741-9360.