Verifiable Proof of Secured Funds

Instructions

For each source of funding the Applicant is listing on the Start-Up Budget, the Consent to Verify the Availability of Funds form is to be completed and signed by the financial institution and account holder (or authorized signer for an organizational account). Availability of these funds will be confirmed at the time of the Administrative Completeness Check, and again before the application package is forwarded to the Board for consideration.

One signed original form is required to be uploaded for each individual/organizational account contributing to the start-up funds for the Applicant. This form may be copied as necessary.

If these funds are in the form of a grant or loan from an organization, this form must be accompanied by an official letter, on letterhead and signed by an officer of the organization, specifying the amount and terms of the grant or loan.

If these funds are a personal loan or gift from an individual or individuals not listed in the application package as a charter principal or authorized representative, this form must be accompanied by a signed, notarized letter from the individual(s) specifying the amount and terms of the gift or loan.

An application package that does not have all sources of start-up funding accounted for with these forms will be deemed Administratively Incomplete.

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Applicant Name:		
Financial Institution:	Branch:	
Financial Institution Contact Name (Account Manage	r):	
Address:		
Phone Number Email:		
Account Holder Type:Individual Joint	Organization	
Account Holder Name(s):		
If organizational account: name, position, and contact num	nber of authorized signer:	
Account Type:Checking Savings	_Other (description):	
Last four numbers of account #: Minimum F	unds Available for Start-Up: \$	
By signing below, the Account Holder verifies that the signing, and authorizes staff of the Arizona State Boa institution that the Minimum Funds Available for Star the Board's consideration of the new charter applicat	rd of Charter Schools to verify with the f t-Up listed above are available immedio	inancial Itely prior to
Printed name of Account Holder or Authorized Signer	Account Holder/Authorized Signature	Date
Printed name of second Account Holder (joint account)	Account Holder Signature	Date
By signing below, the Account Manager verifies: 1. that the funds identified above are available of that presentation of this form, signed by the future verification of the same amount when Charter Schools, which will occur prior to the considered.	Account Holder, will be sufficient docum requested by staff of the Arizona State I	Board of
Printed name of Account Manager	Account Manager Signature	Date

This form may be duplicated as necessary