INDIANA EDUCATION SCHOLARSHIP ACCOUNT

PARENT APPLICATION GUIDE

2023-24 SCHOOL YEAR

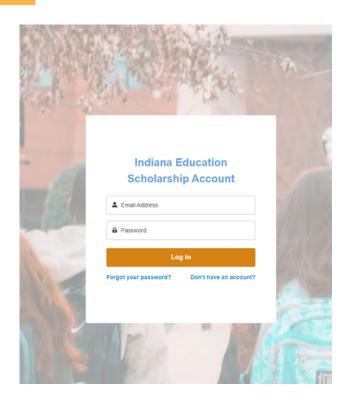
ACCESS THE APPLICATION

Scan the QR Code



or click the link below

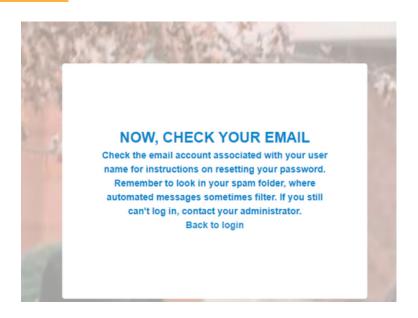
https://intos.my.site.com/parentess/s/login/



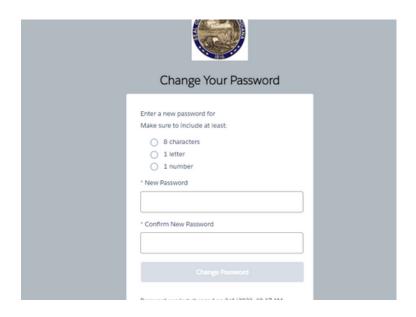
This is the first page you will see after accessing the application link. You can sign-in if you previously created an account or create a new account by clicking "Don't have an account?".



Clicking "Don't have an account?" will you take you to this page to create an account. You will need to provide some basic contact information.

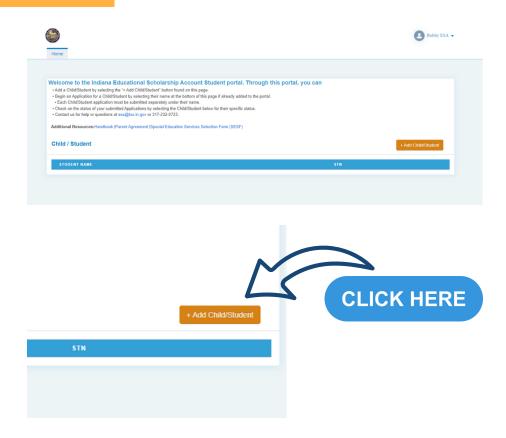


Once you fill out the contact information, you will get an email at the address provided to create a password.



Clicking the link in the email you were sent will take you to this page where you will create your password. Follow the onscreen directions to complete this step. Please be sure to use a unique password and save it somewhere safe.

CREATE A STUDENT CONTACT



Once you have set a password, your account will have been created and you can begin submitting applications. Click the orange "+Add Child/Student" button to create an application.

CREATE A STUDENT CONTACT

Timmy		
Student Last Name		
ESA		
STN(Indiana Student Test Nur	nber)	
•	nber)	
STN(Indiana Student Test Nur	nber)	

Clicking the "+Add Child/Student" button brings you to this page where you will enter you or your student's first and last name, date of birth, and student test number (STN).





If the student information on the previous page is valid, you will see a contact created for yourself or your student. From here, click the orange "+ New Application" button.

What is your relationship to the student applicant?	
Natural Parent	
Adoptive Parent	Is the student applicant a legal resident of Indiana?
Court Appointed Guardian (s) / Custodian(s)	Residency is established by registering to vote, enrolling a child in so
Divorced Parent with court ordered custody or control	RESIDENCY REQUIREMENTS FOR INDIANA
O Foster Parent	
Self (Emancipated Eligible Student)	Yes
	○ No
Proof of relationship to the student applicant is required.	○ I don't know
You have indicated your relationship as :	O TOUR KNOW
This selection requires the following proof :	
Please be prepared to upload the required documentation in a later section of this app	
Cancel Save and Exit Next	Back Save and Exit Next
the student applicant a legal resident of Indiana? esidency is established by registering to vote, enrolling a child in school, paying taxes, or living in the state for ESIDENCY REQUIREMENTS FOR INDIANA.	
Yes	Has the student applicant graduated or obtained a certificate of completic
No	
I don't know	Yes
	○ No
Proof of residency may be in the form of voter registration, student applicant enrollment in an indiana school, executed no less than 163 days prior to applying for the Indiana Education Scholarship Account (ESA).	
Other documentation may serve as proof of residency are items such items as a current utility bill, telephon	
Documentation should be dated within 60 days of student applicant enrollment, and the date should be clearly	
hich Proof of residency will you provide?	Back Save and Exit Next
W2 or Paystub	
Voter Registration	
Student Enrollment in an Indiana School Other documentation	
Back Save and Exit Nod	
hild/Student must have a disability and require special education. Which of the fo	is the student applicant a member of household with an annual income of not more than three hundred percent (3/ price lunch program.
OTE: Below document (IEP, SP, ESA Service Plan) date must be current.	Yes No
	I don't know
enewal: If you choose not to include IEP, SP, ESA SP your child will NOT be enti	
secial education service monies (APC).	Indiana Education Scholarchip Accessed Bloowhold Sacrane Coalchine 3923 2024 Scholar Visus
Land Advantage Communication C	Horselaid Assaul Horselaid
Individualized Education Program (IEP)	Nior Income Limit SM, 197 AR SM, 197 AR LIMIT AND AR SM, 197 A
Service Plan	3 337773 M
Education Scholarship Account Service Plan (ESA SP)	5 SECONOMINA 4 SECONOMINA 5 SECONOMINA 5 SECONOMINA 6
Choice Special Education Plan	7 SYLpan as 8 Shapanan 9 SHAPANAN 10 SYLPANAN
None of the above	9 \$301,345,00 10 \$337,445,00
	*Number of household members
	choose one
Back Save and Exit Next	
	Back Save and Exit Next

The next few pages will ask you questions to ensure that you or your student is qualified for an Education Scholarship Account. How you answer these questions will determine the documentation requested in later steps.

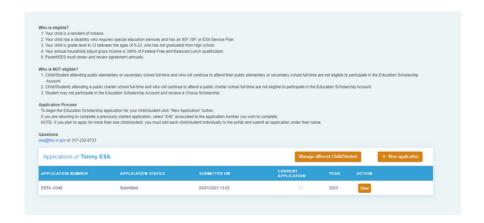
	Upl	oad Proof	f Relationship
Proof of readorship to the student applicant. You have indicated your relationship is Natural Parent. This selection requires the following proof Birth Certificate.		Uplos File	Or Grop
(The documents part of the application is where documents are uploaded for Indiana ESA Specialists to evaluate a student's eligibility. These documents must be a annually upon review). **Probled fresidency** **W2 or Payshab**		Uplo.	or arep
Prior of total household income must be accurate and submitted for each household member. (Proof may be paystub, Federal Form 1999, W2 wage report) "Medication of Income Paystub		Uplo File	Or or op
Application date must fail in the effective date of the document, Documentation must include all pages. "Student Gladelity Plan Document Machinelature Contractor Program (EEP)		Uplos E File	Or Grop

After answering the multiple-choice section to determine eligibility, you will need to submit documentation to support your claims. Please have this documentation ready to submit at time of application. File types preferred are word documents and PDFs.

	PARENT / EMANCIPATED ELIGIBILE STUDENT AGREEMENT	Î
mancipated Eligible ay be used to purch	INTRODUCTION Is Scholarship Account ("INESA") program is administered and overseen by the indianal Treasurer of State ("TOS"). Through the use of dedicated scholarship money, parents of Eligible Students on Students who participate in the INESA program have the opportunity to choose the educational environment and services that help them best meet their unique learning needs. Scholarship money ase approved educational programs, therapies, services, fultion and fees, and other expenses related to the student's education from approved Participating Entities.	
oplication and through	ise fither meet specific residency, age, disability, and income requirements. All Eligible Students or Emanopande Eligible Students must meet the requirement of the INESA program at the time of how the canation of position policipation in the program. Socialization facility will be deposted developing the about subsets, account which will be available to position program at the time of how the action subsets, account which will be available to position program at the time of the action of the action of the available to position available to position and action of the ac	
he following agreem the following:	ent is for those parents of Eligible Students or Emancipated Eligible Students wishing to participate in the INESA program for the current school year. Before you complete the agreement, please	
Read and review th	e materials on the INESA-website at https://www.in.gov/ins/nesa. These materials provide important background on the rules and requirements of the INESA program. Placed Handbook 1-51.4 as it provides the complete six of rules and requirements for the INESA program. 2-51.4 as it provides the complete six of rules and requirements for the INESA program.	
1. I am the parent or	Apropram, the parent ("Parent") of an Eligible Student or the Emancipated Eligible Student (ESS") makes the following assurances: - Repail parent of the student described at the end of this agreement with authority and capacity to act on behalf of the student, or I am the emancipated student, as defined by IC 20-20-11-4, - and of this azaroment or this the authority and capacity to act on behalf of the student, or I am the emancipated student, as defined by IC 20-20-11-4 and of this azaroment or this the authority and capacity to exert in the authority and capacity to exert on the authority and capacity to exert or the authority and the authority an	¥
*FULL LEG	AL NAME	
Your a	application has been successfully submitted. Your application number is ESTA -0340 .	
Exit		

The last step to submit an application for yourself or your student is to sign the Parent / Emancipated Eligible Student Agreement. You will receive a message that your application was successfully submitted after clicking "Sign and Save".





Once your application is submitted, you will be brought back to that student's application page.

From here, you can edit the currently selected application or create a new one if you are applying for multiple students.

Clicking the orange "Manage different Child/Student" button will bring you back to the home page where you can view all applications submitted from your main account.

QUESTIONS?

If you are experiencing trouble submitting an application or have application questions, please contact our office!



M-F 8am-4:30pm



ESA@tos.IN.gov



(317) 232-0723