



**Arizona Department of Education
Empowerment Scholarship Account (ESA)
Tutor/Teaching Services Facility
Accreditation Attestation Form**

Arise AZ LLC

Company Name: _____
13208 N. 17th Ave Phoenix, AZ 85029
Address: _____
602-616-4892
Phone Number: _____
arisegenerationtutoring@gmail.com
Email: _____

Tutor Name(s):

- | | |
|--------------------------|----------------------|
| 1. Katie Lowry Murillo | 11. Elizabeth Kwan |
| 2. Andre Murillo | 12. Kristy Thornton |
| 3. Micah Murlatt | 13. Jaden Swayne |
| 4. Scot Quiggle Briscoe | 14. Benjamin Levy |
| 5. Desiree Wilson Kleppe | 15. Adelayde Steffen |
| 6. Ingrid Drushinin | 16. MeiLing Rhynard |
| 7. Carissa Kresin | 17. Micah Murlatt |
| 8. Bella Guerrazzi | 18. Isabel Abril |
| 9. Taylor Simpson | 19. _____ |
| 10. Jaeden Nagai | 20. _____ |

By signing this form, I attest to the following:

- The tutors named above have a high school diploma (or higher degree) from an accredited state, regional or national accrediting organization per Arizona Revised Statute 15-2402(B)(4)(d).

Company Representative Name: Katie Murillo

Company Representative Signature: Katie Murillo

Date: 2/28/23