



STATE OF IDAHO  
**OFFICE OF THE STATE TREASURER**

JULIE A. ELLSWORTH · STATE TREASURER

**Idaho School Bond Guaranty & Credit Enhancement Application**

This application serves as a request for the Idaho School Bond Guaranty to provide a certificate of eligibility to the applicant. This is not considered a commitment on the part of the applicant or the ISBG Program. Additional information may be requested before a final determination.

An application will not be considered complete, and will not be reviewed, until a signed application, application fee(s), and all information requested within the application is received.

1. Complete the application form.
2. If applying for EFIB Credit Enhancement see section J on payment instructions for the \$500.
3. Include the ISBG required \$250 fee. See section VII for instructions.

**I. General Information**

**A. Name of School District (applicant):**

**B. Contact person for the School District:**

Name:		Title:	
Mailing address:		City:	State: Zip:
Phone:	Fax:	E-mail:	

**C. Applicant's Bond Counsel:**

Name of Firm:		Name of Contact:	
Mailing Address:		City:	State: Zip:
Phone:	Fax:	E-mail:	

**D. Applicant's Financial Advisor (Please identify if applicable):**

Name of Firm:		Name of Contact:	
Mailing Address:		City:	State: Zip:
Phone:	Fax:	E-mail:	

**E. Applicant's Underwriter:**

Name of Firm:		Name of Contact:	
Mailing Address:		City:	State: Zip:
Phone:	Fax:	E-mail:	

**II. Issue Information**

**A. Total Amount of request for participation in the School Bond Guarantee Program:** \_\_\_\_\_

**B. Anticipated pricing date:** \_\_\_\_\_

**C: Will this issue be refunding outstanding debt?**  Yes  No  
 1. If yes, please complete Section III. Refunding Information

**D: Current full taxable property value from Idaho Tax Commission:** \$ \_\_\_\_\_ -  
 1. As of date for full taxable property value: \_\_\_\_\_

**E: Current outstanding G.O. debt:** \_\_\_\_\_  
*Please refer to the Issuance of Certificate of Eligibility Policy Section 2.2 (B)(i)*

**F: What is the underlying debt rating of the school district?** \_\_\_\_\_  
*Please refer to the Issuance of Certificate of Eligibility Policy Section 2.2 (B)(iv)*

**For New Money Bond Issues**

**G. Date of Authorizing Bond Election:** \_\_\_\_\_ **H. Amount Authorized:** \_\_\_\_\_

**I. Amount of outstanding bonds previously issued under the election stated above:** \_\_\_\_\_

**J. Will the district be applying for EFIB Credit Enhancement?**  Yes  No  
 1. If yes, please send a non-refundable check payable to the "EFIB" in the amount of \$500.00.  
 Send check to 816 W. Bannock St., Suite 301, Boise, ID 83702

2. If applicable, provide details on outstanding issues.  Details attached?

Your application will not be deemed complete until the EFIB has received the SGBP certification from the Treasurer's Office.

**III. Refunding Information**

**A. Please complete the table below for issues being refunded:**

Is Series Guaranteed by ISBG Program?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Series:	_____	_____	_____
Current Balance of Issues Refunded	\$ _____	\$ _____	\$ _____
Amount Being Issued	\$ _____	\$ _____	\$ _____
Amount Being Refunded	\$ _____	\$ _____	\$ _____
Outstanding Balance after New Issue	\$ _____	\$ _____	\$ _____
Projected Net Present Value Savings (%) per Issue:	_____ %	_____ %	_____ %

**B. Projected Combined Net Present Value Savings in True Interest Costs:** \_\_\_\_\_ 0.00%  
*Combined savings for non-program refunding's must be 5% or greater at the time of pricing and have a minimum savings of 3% per issue refunded.*

**C. Proof of benefit for refunding's for structural purposes**  Attached  
*Please refer to the Issuance of Certificate of Eligibility Policy Section 2.2 (B)(ii)*

**IV. Private Placements**

**A. Proof of benefit to the issuer for private placements**

Attached

**V. Additional Information**

**A. Has the school district ever defaulted on any of its general obligation, or other bonds?**

Yes  No

If yes, please attach an explanation.  Attached

**B. Provide your audited financial statements from the last three years.**

Attached

**C. Provide the current and next fiscal year budget for the General Fund and Debt Service Reserve fund.**

Attached

**D. Has the school district transferred, loaned, or otherwise used funds collected for the purpose of bond payments for any purpose other than bond payments?**

Yes  No

If Yes, please describe the use the funds and how it was remedied.

Attached

Also attach any policy or procedure changes put in place to prevent the use of debt service funds for any other purpose.  Attached

**VI. Disclaimer**

A certificate of eligibility will be issued based on the information presented in the application and additional required documents. The certificate will be null and void if any of the conditions required in the application and certificate of eligibility policies are not met at the time of issuance.

**VII. Application Fee**

The ISBG requires a \$250 non-refundable application fee to be submitted with each application. Applications will not be processed until a check is received. Please make checks payable to "Idaho School Bond Guaranty" Program.

Per Idaho Code, the State Treasurer's Office has the right to hire a third party advisor for the review of any ISBG applications. Any fee will be passed-through in addition to the standard \$250.00 non-refundable application fee.

The facts and representations in this application and all attachments are true and accurate in all respects and no material facts are omitted to the best of my knowledge.

Name

Title

Signature

Date of Application

Please submit the application fee and any additional supporting documentation via email to:

[Schoolbondguaranty@sto.idaho.gov](mailto:Schoolbondguaranty@sto.idaho.gov)

Please send the application fee to the address below:

Idaho State Treasurer's Office  
Attn: Idaho School Bond Guaranty  
700 West Jefferson, Suite 126  
Boise, ID 83720

ISBG staff will notify you or your representative when all required information has been received and your application is deemed complete.