

Financial Aid Application

School Year: September 20____ - June 20____

All of the information included on this application and on all forms submitted is for the use of the tuition committee ONLY and will be treated in the strictest confidence.

IMPORTANT: This application will not be considered complete without the inclusion of the following forms. Please check to indicate that you have included them:

- ☐ Copy of last 1040 tax return filed – complete with all schedules.
- ☐ Copy of latest pay stub(s) – husband and wife, where applicable.
- ☐ Signed IRS form 4506 (enclosed)

Please answer all questions.

Last Name: _____

Father's First Name: _____

Mother's First Name: _____

Address: _____

City/State/ZIP: _____

Home Phone: _____

Children:

Total Number of Children in Household: ____

Children at home or enrolled in other schools or programs:

Name:	Grade:	Program attending:	Current year:		Next Year:
			Tuition/ Fees:	Scholarship (if any):	Anticipated Tuition/Fees:

Employment:

Father:

Social Security #: _____

Occupation: _____ Job Description: _____

Name of Business/Employer: _____

Address: _____ City/State/ZIP: _____

Phone: (____) _____

Do you, or any relative, own this business? _____

If owned by relative, state relationship to owner: _____

What does business make or sell? _____

Is it: __Corporation __Partnership __Sole Owner

Number of Employees: _____

Do you work?

__Full Time OR __Part Time at ____ hours per week.

Mother:

Social Security #: _____

Occupation: _____ Job Description: _____

Name of Business/Employer: _____

Address: _____ City/State/ZIP: _____

Phone: (____) _____

Do you, or any relative, own this business? _____

If owned by relative, state relationship to owner: _____

What does business make or sell? _____

Is it: __Corporation __Partnership __Sole Owner

Number of Employees: _____

Do you work?

__Full Time OR __Part Time at ____ hours per week.

If any family member holds more than one job, please indicate:

Name:	Employer:	Position:	Hours per week:

Income:

List all income on an annual basis.

Father:

Gross Earnings: _____

Additional Income Sources:

Business Income: a) Gross: _____ b) Net: _____

Commissions: _____

Interest Income: _____ Dividend Income: _____

Rental Income: a) Gross: _____ b) Net: _____

Capital Gains Income: _____

Other Income (specify): _____

Mother:

Gross Earnings: _____

Additional Income Sources:

Business Income: a) Gross: _____ b) Net: _____

Commissions: _____

Interest Income: _____ Dividend Income: _____

Rental Income: a) Gross: _____ b) Net: _____

Capital Gains Income: _____

Other Income (specify): _____

Do you have health insurance as a benefit? Yes/No Provided by: _____

Total Household Income: _____

Expenses:

Housing:

If you rent your home:

Monthly Rent: \$ _____

Monthly Gas: \$ _____ ☐ Included in rent

Monthly Electric: \$ _____ ☐ Included in rent

If you own your home:

Monthly Mortgage Payment: \$ _____

Annual Real Estate Taxes: \$ _____ ☐ Included in monthly mortgage

Monthly Gas: \$ _____

Monthly Electric: \$ _____

Loans:

Do you have a second mortgage or home equity loan? Yes/No

If Yes:

Loan Amount: \$ _____

Monthly Payments: \$ _____

Years left to pay off: _____

Date loan taken: _____

Reason for loan: _____

Other significant annual expenses (do not include tuition or camp): \$ _____

Specify: _____

Assets:

Do you own your home? Yes/No

If Yes: Original Purchase Price \$ _____ Down Payment: \$ _____

Date of Purchase: _____ Is your home: Single Family/Multi Family

Do you own a second home or bungalow? Yes/No

If Yes: Original Purchase Price \$ _____ Down Payment: \$ _____

Date of Purchase: _____ Purpose (Circle one): Vacation/Rental/Other: _____

Please list all cars you or any family member own or lease:

Make/Model/Year	Total Monthly Payments	Owned/Leased

Market value of other real estate: \$ _____

Market value of stocks and bonds: \$ _____

Savings balance: \$ _____

Checking balance: \$ _____

IRA, Pension plans, TDA, Savings and Thrift, etc. \$ _____

Custodial accounts for children: \$ _____

Miscellaneous:

Do you employ household help? Yes/No

Monthly Cost: \$ _____ Hours per Week: _____
 Do you employ a gardener? Yes/No Monthly Cost: \$ _____
 Where do you spend summers (name and location)? _____
 Indicate cost of above: Last summer: \$ _____ This coming summer: \$ _____
 Did you take any vacations during the last 12 months (including trips or hotel stays over Yom Tov)?
 Please indicate destination: _____
 Total cost (include air fare, hotel, food, tips, etc.): \$ _____

Camps:

Child's Name:	Last Summer:		This Coming Summer:	
	Camp Name:	Total Fees:	Camp Name:	Total Fees:

Please indicate any additional information you feel may be relevant. (If you require more room, please use additional sheet of paper.): _____

Total Tuition Due \$17,500.00 for the 20__-20__ year.

I request a scholarship of \$ _____,
requiring me to pay \$ _____ for the 20__-20__ year.

I fully understand that my submission of this application represents the acknowledgement of certain obligations on my part toward the Yeshiva. I agree that should a scholarship be awarded, I am hereby obligating myself to assist the committee in its efforts to raise sufficient funds to continue to disburse grants such as mine. Such assistance will take the form of my commitment to raise certain predetermined sums for the Scholarship Fund and/or to participate in various fundraising projects as mandated by the Yeshiva. I also understand that in lieu of tuition the Yeshiva has the right to obligate my son to participate in the work-study program.

I further agree that if there is any change in the information contained herein, such as an increase in income or change in employment, I will notify the committee, and as a result of said change, the committee may revoke all or part of this grant at their discretion and I agree that they may add that amount to my tuition obligation.

I hereby give the Yeshiva permission to request, at its sole discretion, a credit report from TRW Credit Services

Please Note: Anyone who has outstanding balances from previous years will not be awarded any scholarship.

The information contained herein is correct to the best of my knowledge and belief.

Signature: _____

Date: _____

Spouse's Signature: _____

Date: _____