

South Florida Jewish Academy

Application for Tuition Assistance School Year 2010-2011

For Students:

Last Name: _____ First Name _____ Entering Grade: _____

Last Name: _____ First Name _____ Entering Grade: _____

Address: _____ City: _____ State: _____

Home Phone: _____ Cell/Beeper: _____ E-mail address: _____

Father: (If information is same as shown above, write "Same")

Name: _____ Home Phone: _____

Address: _____

City: _____ State _____ Zip _____

E-mail Address: _____ Cell/Beeper: _____

Social Security #: _____

Mother: (If information is same as shown above, write "Same")

Name: _____ Home Phone: _____

Address: _____

City: _____ State _____ Zip _____

E-mail Address: _____ Cell/Beeper: _____

Social Security #: _____

Dear Parents:

Enclosed is the 2010-2011 school year Financial Assistance application. This application must be completed and returned to the school no later than April 30, 2010. You must complete the application in full and supply all documents shown on the checklist. Your 2009 federal income tax return must be included or brought in no later than April 30 2010.

Scholarship funds are very limited. Financial aid given to applicants filing after the April 30, 2010 due date may be substantially less than that provided to applicants filing on time.

It is imperative that you complete the **entire** application. You **must** state how much you **can** afford to send your child to the South Florida Academy.

PLEASE NOTE:

- If your application is not complete, it will not be considered.
- If you are not current in your school payment your application will not be reviewed until you become current.
- Your scholarship is conditional upon your completing the Give-Get and (if you received a scholarship this year) a minimum 50 volunteer hour requirements by the end of the current school year.
- You must return your volunteer schedule (below) with this application.

The South Florida Jewish Academy expects families who receive financial assistance to volunteer 50 hours a year to help the school.

Please indicate below when you can help. This may include Sundays, holidays and evenings. *If you fail to respond to this, your Financial Assistance application will not be considered.*

Lunch Room: Monday-Friday 11:45 am - 1:00 pm

Day _____ Time _____

Office: Monday-Friday 8:00 - 3:15 pm (2 or more hours)

Day _____ Time _____

Teacher-Aide: Monday-Friday 8:00-3:30 pm

Day _____ *Full Days Only*

Tutoring: Monday-Friday 8:00 – 3:30 pm

Day _____ Time _____

Other times available to assist: _____

Activities able to assist with: _____

- Office
- Fundraising/special events
- PTO
- Building improvement
- Marketing
- Driving – field trips
- Other _____

Please note subject of expertise: _____

If returning Student - Have you completed your 50 hours this year? _____yes _____no

If you need any assistance with filling out this application, please do not hesitate to call the school office.

Sincerely yours,

Scholarship Board

Special Note for Divorced or Separated Parents: If parents are separated or divorced, the student's custodial parents and that parent's present spouse (if any) should complete the form. If someone other than the custodial parent is financially responsible in full or in part for the student through child support, or if the non-custodial parent is responsible for tuition and seeks financial aid, that person should complete the form and explain his or her relationship to the student.

Financial Information

Please include a list of loans indicating monthly amount, name of creditor, maturity date and type:

Monthly Payment	Name of Creditor	Type	Maturity Date	Balance
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

ASSETS

Please identify each vehicle you own or lease:

	Make	Model	Year	Price	Monthly Payment
<input type="checkbox"/> Own 1. <input type="checkbox"/> Lease	_____	_____	_____	_____	_____
<input type="checkbox"/> Own 2. <input type="checkbox"/> Lease	_____	_____	_____	_____	_____
<input type="checkbox"/> Own 3. <input type="checkbox"/> Lease	_____	_____	_____	_____	_____

Please list all bank accounts, name of bank, present balance. Include checking, savings, CD's, IRA's, etc.

Name of Bank	Holder(s)	\$ Balance
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Real Estate: (personal residence, and any other real estate owned)

Description/Address	Purchase Price	Current Value	Balance	Mortgage Holder
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

List all Foreign Assets: _____

Securities: (Stocks, bonds, mutual funds, money market funds, government securities, etc.)

Describe Stocks, Bonds and/or Securities	Quantity or Denomination	Current Value
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

INCOME & EXPENSES

Monthly Income

Monthly Expenses

Gross Salary & Wages (Father/Stepfather/Male Guardian)	\$	Rent or Mortgage	\$
Gross Salary & Wages (Mother/Stepmother/Female Guardian)	\$	Home Maintenance	\$
Dividend & Interest Income	\$	Real Estate Taxes	\$
Child Support Received	\$	Taxes (if not withheld from paycheck or mortgage payment)	
Alimony Received	\$	Other Taxes	\$
Rental Income	\$	Health Insurance	\$
Disability Benefits	\$	Medical/Dental	\$
Pension Benefits	\$	Car Payments	\$
Social Security Benefits	\$	Car Insurance	\$
Other Government Benefits (SSI, Food Stamps, Medicare, Medicaid)		Car Repairs	\$
Other Income	\$	Electric	\$
		Water	\$
	\$	Other Utilities	\$
	\$	Food	\$
	\$	Cable	\$
	\$	Credit Card Payments	\$
	\$	Housekeeper	\$
	\$	Child care / Nanny	\$
	\$	Clothing	\$
	\$	Child Support	\$
	\$	Alimony	\$
	\$	Donations	\$
	\$	Synagogue Dues	\$
	\$	Lessons for all Children (Music, Dance, Gym, etc.)	\$
	\$	Recreation & Education	\$
	\$	Grooming	\$
	\$	Trips & Vacations	\$
	\$	Day Camp & Summer Camp	\$
	\$	Before or After School Care	\$
	\$	Insurance-Homeowners	\$
	\$	Insurance-Life	\$
	\$	Insurance-Other	\$
	\$	Tuition to South Florida Jewish Academy	\$
	\$	Tuition to other Schools	\$
	\$		\$
<i>TOTAL MONTHLY INCOME</i>	\$	<i>TOTAL MONTHLY EXPENSES</i>	\$
	\$		\$

*** WE CAN PAY _____ per year or \$ _____ per month during the school year 2009-2010 for our child(ren)'s education at the South Florida Academy . ***

Family Information

Please complete the following if any child in the family is currently attending or will be attending any private (non-public) school (preschool to 12th grade), or any public or private college.

Provide *this* school year (2009-2010) information for all dependent children.

Amount Paid From:

Child's Name	Grade	School Name	Total cost for one school year	Parent	Financial Aid	Loan	Other

Provide *next* school year (2010-2011) information for all dependent children.

Amount Paid From:

Child's Name	Grade	School Name	Total cost for one school year	Parent	Financial Aid	Loan	Other

Please state your reasons, in detail, for enrolling your child(ren) at SFJA. If new to the school, who recommended you?

Other Information

Foreign Identification Number(s) and Teudat-Zehut Number(s) _____

Other names or aliases _____

Previous address(es) for last 7 years:

1. _____

2. _____

3. _____

List all other individuals who may be financially responsible for child in school (natural parent in divorce, grandparent or other)

Name	Address	Describe Circumstances

Synagogue Affiliation		
Name	Address	If none, please explain

Do you have any relatives in the school? If yes, who?

Please explain in detail the nature of all after-school or weekend activities your child participates in:

Describe any trips or vacations that you or your family have taken in the last three (3) years, or plan to take in the calendar year 2007-2008. How much was spent or do you anticipate spending?

Other Information (Continued)

Please complete the following if any child(ren) in your household attended a summer camp (day camp or sleep away camp.)

Provide last summer (2009) information for all dependent children.

Amount Paid From:

Child's Name	Camp Name	Camp Location & Dates of Camp	Parent	Financial Aid	Loan	Other

Provide this summer (2010) information for all dependent children.

Amount Paid From:

Child's Name	Camp Name	Camp Location & Dates of Camp	Parent	Financial Aid	Loan	Other

PARENTAL ASSISTANCE

An important part of a parent's responsibility for receiving scholarship for his/her child's education is a commitment to providing time and expertise to the school. A minimum of 50 hours is required to fulfill this obligation.

During the current school year I have volunteered and/or fundraised in the following ways:

I bought and/or sold _____ tickets/raffle to the Scholarship Fundraiser

I bought and/or sold _____ ads in the fundraising journal.

AUTHORIZATION

I certify that all of the financial information submitted on this application form, to the best of our knowledge and belief, is true, correct and complete and that I will inform the school of any change in status which may occur during the school year.

I hereby authorize South Florida Jewish Academy to make such credit inquiries as it deems necessary. I hereby direct any and all employers, banks, credit card companies and credit reporting agencies to release any and all financial information, records, reports and documentation to the South Florida Jewish Academy without limitation until this authorization is revoked in writing by the undersigned. If required, we agree to send the South Florida Jewish Academy Scholarship Committee any additional information deemed necessary to aid the proper evaluation of this application and to allow them to visit our home if deemed advisable.

Signed:

Signature of parent or guardian	Date
Signature of spouse making joint application for financial assistance	Date

Mail to:

**South Florida Jewish Academy
4640 NW 74th Pl
Coconut Creek, Florida 33073**

A \$75.00 processing fee must accompany this application.

Note: The Scholarship Committee will not review applications that are incomplete and/or lack necessary documentation

For Committee Use Only:

- Family has paid financial obligations to our school in a prompt manner Yes No
- [] has fulfilled their Give-Get obligation for 2009-2010 Yes No
- [] has volunteered in the service of the school Yes No
- [] has helped with scholarship fundraising efforts Yes No
- [] has provided a completed application Yes No
- for the Florida Opportunity Scholarship Program **(Florida P.R.I.D.E)**
- [] Receives Mckay scholarship fundraising Yes No Matrix#_____

Committee Members Making Decision:

1. _____ 2. _____
3. _____ 4. _____

Tuition set at \$ _____ annually

Scholarship provisional. Review again on _____

DOCUMENT CHECKLIST

Please note that you must also supply certain documents with your completed application. These items are:

- * 6 Names and phone number of 6 pre-screened family members or friends for Special Requirement Fundraiser (See pg. 10)
 - * Copy of your completed 2008 & 2009 Personal Federal Income Tax Return
 - * Copy of your completed 2008 & 2009 Corporate Federal Income Tax Return
 - * Copy of all W-2 forms received for income earned in 2008 & 2009
 - * Two current pay stubs for each spouse (for last 2 months)
 - * Copy of your 2008 & 2009 year-end Mortgage Statement for all properties you own including for your primary residence, secondary residence, time-share or business property
 - * Copy of all leases for all properties you rent, including your primary residence and business property
 - * Copy of all bank statements for the three months prior to application
 - * Copies of credit card statements for all accounts for the three months prior to application (all pages)
 - * If divorced or separated, a copy of your divorce decree and a complete copy of any property/marital settlements entered into between you and the other parent. If there is any pending litigation regarding child support, Support Enforcement or child custody, provide copy of all such documents.
 - * A copy of your most recent auto insurance declarations, statement or bill
 - * A legible copy of driver's licenses of all responsible parties.
 - * A copy of any and all foreign ID #'s such as Teudat Zehut.
 - * Parental Assistance Section completed.
 - * A letter detailing your family's participation in school activities this year: Programs attended, PTO committee membership, fundraising efforts, volunteer service, number of raffles sold, number of tickets bought/sold for scholarship concert, etc. Include information on any services you intend to provide to the school next year.
 - * A completed application for The Florida Opportunity Scholarship Program for the 2010-2011 school year. (for students entering Kindergarten or Grade 1 or 1-12 transferring from a public school). Applications must be filed before July 1, 2010.
- * **Be sure to indicate N/A (not applicable) on parts that do not pertain to you. This application will not be considered complete unless all parts of it have been addressed.**

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