

Mesivta Ateres Yaakov  
Yeshiva Gedolah Ateres Yaakov  
131 Washington Avenue  
Lawrence, NY 11559  
516-374-6465



**Application for Tuition Assistance  
2018-2019 School Year**

Instructions:

1. Complete all parts of this application.  
Enter "None" or "N/A" where applicable. All of your submissions and documentation, both online and printed, will be held in the strictest confidence.
2. Attach the copies of the following documents:
  - Copy of your most recent Federal Tax Return (form 1040) with **ALL** supporting schedules.
  - Copy of all business returns, if applicable.
  - Copy of latest pay-stub for both husband and wife, where applicable.
  - If the prospective student is transferring from another high school, please provide a tuition clearance form.
  - Copy of tuition contracts for other children.
3. Complete the identifying information below, read the terms of this application, and sign your affirmation of those terms.
4. **Applications will not be reviewed until registration is paid.**
5. **Submit this application and attachments to the yeshiva office within 2 weeks of receipt.**

Family Name: \_\_\_\_\_ Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

Father's Cell: \_\_\_\_\_ Mother's Cell: \_\_\_\_\_

Father's Email: \_\_\_\_\_ Mother's Email: \_\_\_\_\_

I hereby affirm that the information contained herein and the documents, which I have submitted, are true and correct. I understand that the Yeshiva (Mesivta and Yeshiva Gedolah Ateres Yaakov) reserves the right to request more paperwork in the future if deemed necessary, and I hereby give the Yeshiva my permission to verify the information reported herein, including obtaining credit information from credit reporting services. Furthermore, I understand that one or more representatives of the Yeshiva may elect to visit me at my home or may ask for additional information or explanations in writing.

I further agree that if there is any change in the information contained herein (increase in income, spouse becoming gainfully employed, etc.) that I will notify the Yeshiva ASAP. I understand that if my financial situation changes for the better, or if the Yeshiva finds that any pertinent information is inaccurate, it may revoke, in part or in whole, any financial assistance offered or provided, and I may become retroactively liable for repayment of tuition assistance previously provided on the basis of this application.

I understand that any tuition assistance offered is provided with the understanding that the recipient will make a good faith attempt to repay the Yeshiva in the future if my financial situation improves, so that assistance may be offered to others who are in need. I understand that the yeshiva regularly solicits subsidies for its tuition assistance budget from granting agencies such as Rose Biller and Gruss. I understand that if I am awarded tuition assistance, I am obligated to cooperate in whatever submissions the yeshiva makes on my behalf, but that any outside subsidies received do not further reduce my family's tuition obligation. Rather they assist the yeshiva with covering any tuition reductions it has provided to me as part of my tuition contract. Any tuition assistance granted will be for the current year only and should I require assistance in any future school year, I will submit a new application with updated information.

Father's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Mother's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**FAMILY DATA**

Married [ ]    Divorced [ ]    Separated [ ]    Widowed [ ]

Total # of unmarried children in household: \_\_\_\_\_ Total # of married children: \_\_\_\_\_

Children **attending MAY now or entering MAY** for the upcoming school year:

CHILD'S NAME	CURRENT GRADE	CURRENT SCHOOL OR PROGRAM	CURRENT FULL TUITION	CURRENT TUITION BEING CHARGED

Children at **HOME** or enrolled **ELSEWHERE**:

CHILD'S NAME	CURRENT GRADE	AGE	SCHOOL PROGRAM OR AT HOME	FULL TUITION AND FEES	CURRENT TOTAL OBLIGATION (TUITION AND ALL FEES)

**ASSETS**

**Property Owned:**

	Yr Acquired	Multi-family? Y/N	Down Payment	Mortgage balance	Home Equity Loan Balance	Monthly R/E Tax Payments	Total Monthly Loan Payments	Total monthly Utility/Repair Costs
Primary Residence								
Vacation Home								
Other								
Other								

If you RENT an apartment or home, please state the monthly: Rent \$\_\_\_\_\_ and Utilities \$\_\_\_\_\_

If you OWN a home or homes and you had made any additions/improvements in excess of \$2,500 in the last two years, please state details including amount spent:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Other Assets:**

Value of all accounts in banks, M/M funds, etc..	
Cash value of all life insurance	
Value of all IRA/SRA/TDA/401K accounts	
Market value of stocks/bonds (including retirement accounts)	
Market value of property owned other than home(s)	
Value of other investments not included above	
Frequent flyer mileage balance and airline affiliation	

Businesses owned by either spouse (for additional businesses, attach an additional page):

Name: \_\_\_\_\_ Service/Product: \_\_\_\_\_

Family-owned business     Corporation     Partnership/% Amt. \_\_\_\_\_     Individually owned

Profit or loss for most recent year \$\_\_\_\_\_

**EMPLOYMENT AND INCOME**

**=== HUSBAND ===**

Primary Occupation: \_\_\_\_\_ [ ] Employee [ ] Self-employed

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Tel #: \_\_\_\_\_ # of years at this occupation/position: \_\_\_\_\_

[ ] Full time [ ] Part Time - \_\_\_\_\_ hrs/week Annual Gross Salary/Draw: \_\_\_\_\_

Secondary Occupation: \_\_\_\_\_ [ ] Employee [ ] Self-employed

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Tel #: \_\_\_\_\_ # of years at this occupation/position: \_\_\_\_\_

[ ] Full time [ ] Part Time - \_\_\_\_\_ hrs/week Annual Gross Salary/Draw: \$\_\_\_\_\_

**=== WIFE ===**

Primary Occupation: \_\_\_\_\_ [ ] Employee [ ] Self-employed

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Tel #: \_\_\_\_\_ # of years at this occupation/position: \_\_\_\_\_

[ ] Full time [ ] Part Time - \_\_\_\_\_ hrs/week Annual Gross Salary/Draw: \$\_\_\_\_\_

Secondary Occupation: \_\_\_\_\_ [ ] Employee [ ] Self-employed

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Tel #: \_\_\_\_\_ # of years at this occupation/position: \_\_\_\_\_

[ ] Full time [ ] Part Time - \_\_\_\_\_ hrs/week Annual Gross Salary/Draw: \$\_\_\_\_\_

**INCOME**

List all income on an annual basis, whether or not such income is taxable or appears on your tax return.

	Last Year	Anticipated Current Yr	Do you receive
Husband's Gross Earnings			Section 8.....Y/N____
Wife's Gross Earnings			WIC.....Y/N____
Parsonage			Food Stamps..Y/N____
Interest & Dividends			Medicaid.....Y/N____
Net Rental Income			
Gain on Sale of Investments			
Other Income (e.g. Parental help)			
<b>Total</b>			

**LIABILITIES**

	Total Outstanding	Monthly Payment
Credit Card Debt		
Other loans		
Other Liabilities: _____		
Other Liabilities: _____		

**EXPENSES**

Vehicle Make/Model/Year	Owned/Leased/Company Car	Monthly Payments	Balance Due

Do you pay for your own medical/dental insurance?      Y/N \_\_\_      Monthly payment:      \$ \_\_\_\_\_

Do you have any unreimbursed medical expenses?      Y/N \_\_\_      Total outstanding:      \$ \_\_\_\_\_

Have you taken any trips/vacations during the past 12 months?      Y/N \_\_\_      Cost:      \$ \_\_\_\_\_

Specify locations and durations: \_\_\_\_\_

Where did your family spend this past Pesach & Succos: \_\_\_\_\_

Have you celebrated any smachot this past year (weddings, bar/bat mitzvahs)? Y/N \_\_\_

Please provide a brief description, including location and total cost:  
 \_\_\_\_\_  
 \_\_\_\_\_

Summer camps:	Last Summer		Upcoming Summer	
	Camp	Total Fees Paid (incl. all camp charges)	Camp	Total Fees Paid (incl. all camp charges)

Other significant annual expenses other than housing, camp, school, food, car (e.g. babysitter, housekeeper, gardener, etc.):

	\$ _____		\$ _____
	\$ _____		\$ _____
	\$ _____		\$ _____

**INSTITUTIONAL SUPPORT**

The yeshiva endeavors to assist all families in need from its limited budget for financial assistance. However, all such assistance reduces the funds available to operate the yeshiva. Parents who are seeking financial assistance are encouraged to help the yeshiva defray expenses to minimize the impact of that assistance on its programs and operations, and that assistance can be a significant factor in determining the amount of financial assistance that can be offered.

Please indicate if you, or your spouse, are qualified to help the yeshiva with one or more of the following operational needs:

Specialized Skills:

- Substitute teacher
- Legal Assistance
- Accounting/Bookkeeping
- Bus driver (licensed)
- Team sports supervision
- Musician
- Kosher catering
  
- Plumber
- Electrician
- Building repairs and construction
- Interior decoration
- Roofing repairs
- Alarm & A/V Systems work
- Heating and Air Conditioning
- Locksmith
- Gardening
- Custodial Help
- IT Support
  
- Newsletter/Brochure editing
- Writer (PR, publications..)
- Computer graphics and layout
- Website maintenance
- Photography (events, PR, brochures)

Other Tasks:

- Office and phone coverage
- Clerical/secretarial assistance
- Breakfast program assistance
- Lunch program assistance
- Student trip chaperone
- Driving for special events
- Data Entry
- Mailing operations (printing, folding, stuffing, etc..)
- Telephone squads (recruiting, soliciting, reminders..)

Events Support:

- Setup
- Decorating
- Supervision
  
- Other – Please specify:

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When would you or your spouse be available to assist the yeshiva? Please check all that apply:

Day of Week	Morning	Afternoon	Evening	Breakfast	Lunch
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

**SPECIAL CIRCUMSTANCES**

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

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**REQUESTED ASSISTANCE**

Enter your total MAY tuition contract assessment  
(including registration, insurance, tuition and building fund) \$ \_\_\_\_\_

Enter the total amount of tuition and all contract fees that you feel you are able to pay  
for all children attending Ateres Yaakov \$ \_\_\_\_\_

Enter the amount of assistance you are requesting (**Do not leave blank!**) \$ \_\_\_\_\_

FOR OFFICE USE ONLY

	PRIOR YEAR	APPLICATION YEAR
Total Charges		
Assistance Approved		
Parent Obligation		
Balance unpaid		