

TUITION ASSISTANCE APPLICATION ADDENDUM 2018-2019 - COMMON FORM

Torah School of Greater Washington (FACTS ID 34084) and Yeshiva of Greater Washington (FACTS ID 856)

PARENT NAMES

1) _____
 2) _____

DATE _____

EDUCATIONAL AND CHILD CARE EXPENSES

Starting with the oldest, please complete the following information **for each dependent child** as shown on your latest Federal tax return, who is in a child care facility or any educational institution.

Child Name	Academic Year 2017-2018				Academic Year 2018-2019		
	Grade	Institution Name	Full Cost - Tuition, Room and Board (\$)	Total Paid (\$)	Institution Name	Full Cost - Tuition, Room and Board (\$)	Total Offered (\$)
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$
			\$	\$		\$	\$

INCOME INFORMATION

A. CASH	Please Enter Values (\$) or N/A if Not Applicable		
	2017 Actual	2018 Projected	2019 Forecast
Total Income - IRS Form 1040 Line 22	\$	\$	\$
Retirement Contributions - W2 box 12	\$	\$	\$
Parsonage	\$	\$	\$
Gifts Received	\$	\$	\$
Alimony Received	\$	\$	\$
Child Support Received	\$	\$	\$
Worker's Compensation	\$	\$	\$
Social Security	\$	\$	\$
SSI (Supplemental Security Income)	\$	\$	\$
Disability	\$	\$	\$
TANF (Temporary Assistance for Needy Families)	\$	\$	\$
Unemployment	\$	\$	\$
Other, specify:	\$	\$	\$
TOTAL	\$	\$	\$
B. PAYMENTS IN KIND (free or reduced price goods or services)			
Housing	\$	\$	\$
Food (examples: WIC, SNAP, other sources)	\$	\$	\$
Medical/Insurance (services or insurance)	\$	\$	\$
Other, specify:	\$	\$	\$

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 2) _____

MAJOR ASSETS

1. Homeowner (1st home) Purchase Date _____ Original Cost \$ _____
 Current Value \$ _____ Balance Owed \$ _____

2. Homeowner (2nd home) Purchase Date _____ Original Cost \$ _____
 Current Value \$ _____ Balance Owed \$ _____

3. All other Real Estate owned Purchase Date _____ Original Cost \$ _____
 (wholly or partly) - provide the Current Value \$ _____ Balance Owed \$ _____
 following for each property *use additional sheet if necessary*

4. Present Value of all retirement savings/investments \$ _____
 (e.g., IRA, 401(k)) as of 12/31/17

5. Present Value of all non-retirement savings/investments \$ _____
 as of 12/31/2017

- 1) stocks/bonds/CDs/other investments \$ _____
- 2) savings accounts \$ _____
- 3) checking accounts \$ _____
- 4) other investments \$ _____

6. Value of all Children's Trust, Guardianship and/or Gift to Minor \$ _____
 accounts as of 12/31/17

7. Value of all IRS Section 529 accounts: \$ _____
 List for each account: beneficiary, and value on 12/31/2017

- 1) _____ \$ _____
- 2) _____ \$ _____
- 3) _____ \$ _____
- 4) _____ \$ _____

8. Automobiles No. owned _____ No. leased _____
 List make, model, year, leased/owned, monthly payment for each

- 1) _____ \$ _____
- 2) _____ \$ _____
- 3) _____ \$ _____

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SUPPLEMENTAL INFORMATION

1. Did you apply for Maryland BOOST benefits last year yes / no _____
 If YES, did you receive any yes / no _____
 If YES, how much did you receive, per child \$ _____

2. Vacations Annual Cost \$ _____ If not self-paid, who paid _____

3. Pesach trips/vacation Cost \$ _____ If not self-paid, who paid _____

4. Trips to Israel Total 2017 Cost \$ _____ If not self-paid, who paid _____

5. Cleaning Help Annual Cost \$ _____ If not self-paid, who paid _____

6. Home Improvement Cost last 5 years \$ _____
 If yes, please describe _____

7. Overnight Summer Camp 2017 Total	\$ _____	If not self-paid, who paid	_____
child / cost	\$ _____	child / cost	\$ _____
child / cost	\$ _____	child / cost	\$ _____
child / cost	\$ _____	child / cost	\$ _____
child / cost	\$ _____	child / cost	\$ _____

8. Total Maaser/Tzedakah given in 2017 (*Answer Required*) \$ _____

9. Additional Information - Please document any additional information that you feel germane to your assessment. For example, eldercare support, unusual work-related expenses, travel costs. If necessary continue on the back. Also continue responses to previous questions here.

PARENT SIGNATURES - Required to process Application. Signatures or typed names with electronic submission certify accuracy of information provided.

1) _____
2) _____