



Community High School for Judaic Studies
A program of the Federation for Jewish Philanthropy of Upper Fairfield County

4200 Park Avenue, Suite 300, Bridgeport, CT 06604 (203) 450-5303

TUITION ASSISTANCE APPLICATION

(All information provided is kept strictly confidential)

Merkaz Community High School for Judaic Studies would like very much to help you access the services we offer, and not exclude anyone due to a temporary inability to pay full price. To help us help you, please:

- Complete **all** information requested in the form below, and
- Include a **letter explaining your situation** and any circumstances which affect your request, and

Person completing application: _____ Date: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

List all family members living at home

Name	Relation	Birth Date	Job & Employer / School & Grade

Which person(s) are you seeking a Merkaz Fee Adjustment for?

1. Name: _____

Cost for Service \$ _____ Cost you feel you can pay \$ _____

2. Name: _____

Cost for Service \$ _____ Cost you feel you can pay \$ _____

A. Annual Income and Expenses as Reported on Federal Income Tax Return

Income	Previous Year: <u>2021</u>	Current Year (estimated): <u>2022</u>
Father's gross earnings		
Mother's gross earnings		
Interest income		
Rental income		
Social Security		
Unemployment		
Alimony payments		
Child support payments		
Other income (specify)		
Expenses	Previous Year: <u>2021</u>	Current Year (estimated): <u>2022</u>
Annual rent or mortgage payments		
Real estate tax		
Education expenses (incl. copy of bills)		
Uninsured medical bills		
Payments on loans, charge accts, etc.		
Other extraordinary expenses (specify)		

B. Statement of assets and liabilities

Assets	Liabilities
Home: market value Unpaid mortgage	List outstanding loans, debts, and their balances:
Savings Accounts	
Other Investments	
Car #1 (Year, Make, Model):	
Car #2 (Year, Make, Model):	
Other Assets	

CERTIFICATION AND AUTHORIZATION

"I (we) declare that the information reported in this application is true and complete, and may be verified/used by Merkaz to determine a Fee Adjustment offer. I (we) will verify the data in this application with a copy of my (our) latest Federal Income Tax Return."

Signature(s)

Date