



Financial Aid Request Form Academic Year 2018-19

Dear Applicant:

The scholarships available are limited, therefore we urge you to fill out the attached application as quickly as possible and email to our office – YeshivasLevZion@gmail.com We have prepared this application to enable the Tuition Committee to act in a fair manner, and it will be used as a guide for all scholarships.

The information contained herein and all supporting documents submitted is for the Tuition Committee only, and will be handled with the utmost discretion and treated with strict confidence.

For any questions, please contact R' Ethan Katz directly at
058-678-5289 / 847-353-9823 (Whatsapp only)

INSTRUCTIONS

1. Please answer all questions eligibly and properly.
2. Be sure to sign your name on the last page.
3. Your most recent 1040 Federal Tax Return (2017) is REQUIRED for you to be considered for a scholarship. NO APPLICATION WILL BE ACCEPTED WITHOUT A TAX RETURN.
4. Enclose a \$250 registration fee. NO SCHOLARSHIP REQUEST WILL BE CONSIDERED WITHOUT FULL PAYMENT OF THE \$250 REGISTRATION FEE.

You can mail a check to:

CCJH, 567 Cedar Hill Rd. Far Rockaway, NY 11691

(Make check payable to "CCJH" with "Lev Zion Reg. Fee" written in the memo)

Or you can pay by debit/credit card direct with our secure processing system at

<https://secure.cardknox.com/ccjh>

5. Sign & scan completed form, and send to YeshivasLevZion@gmail.com

Student's Name: _____

Home address: _____

Home Phone: _____ Fax: _____

E-Mail Address: _____

Social Security #: _____ Citizenship: _____

FAMILY INFORMATION

Father's Name _____ Occupation _____

Annual Salary _____

Mother's Name _____ Occupation: _____

Annual Salary _____

Parents' current marital status: Married Separated Divorced Widowed

Number of children in family: _____

Please give the following information on siblings included in parents' household:

Name:	Age:	School attended (2017-18)	Tuition and fees
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TUITION HISTORY OF APPLICANT (From most recent school attended)

School _____ Amount Paid _____

AUTOMOBILES USED IN YOUR HOUSEHOLD:

Year	Model	Year Purchased	Cost	Driven by
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

RESIDENCE INFORMATION

Do you own _____ or rent _____ your home:

Homeowners: Monthly mortgage payments _____ principal outstanding \$ _____

Renters: Monthly rent \$ _____

For the school year of 2018-19 at Lev Zion, tuition is \$24,000 . What is the minimum amount of scholarship aid you will require?

I CAN PAY _____ I NEED A SCHOLARSHIP OF \$ _____

Please describe any unusual expenses, debts, or circumstances affecting your financial situation. You may attach a separate sheet.

Please note: The school policy does not permit students receiving financial assistance from Lev Zion to travel outside of Israel during the academic school year, with the exception of a sibling's wedding, i.e. not Chanukah or Pesach vacation.

Certification:

All the information of the form is true and complete to the best of my (our) knowledge.

Signed: Father _____

Mother _____

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This form must be emailed to YeshivasLevZion@gmail.com

ALL THE INFORMATION ON THIS FORM WILL BE KEPT STRICTLY CONFIDENTIAL