



RAMAZ TUITION ASSISTANCE OFFICE

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New York, NY 10075

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**APPLICATION FOR TUITION ASSISTANCE
2020-2021**

STATEMENT OF SCHOOL POLICY

Ramaz deeply believes that tuition assistance is an essential expression of our values and critical for our families whose circumstances require such assistance. The monies used for tuition assistance come from the Ramaz Scholarship Fund, solicited from parents, alumni, and other friends of the school. Ramaz has an obligation to provide careful stewardship of the Fund so as to maximize the amount of assistance it can offer. Scholarships are assigned to qualified applicants whose families are not able to meet the full cost of tuition. Scholarships are granted for a period of one year only. It is the obligation of each tuition assistance applicant/recipient to inform the Office of Tuition Assistance immediately of any change in circumstances that might justify reconsideration of the amount of the grant.

Due Date and Additional Information

Please remember that the Ramaz Tuition Assistance Application should be submitted by **April 22, 2020**. If you have any questions concerning the Ramaz Tuition Assistance Application or the tuition assistance process, please email tuitionassistance@ramaz.org.

Kindly Print or Type

Date _____

Student's Name	Student ID	Grade as of September 2020
Student's Name	Student ID	Grade as of September 2020
Student's Name	Student ID	Grade as of September 2020
Student's Name	Student ID	Grade as of September 2020
Student's Name	Student ID	Grade as of September 2020
Student's Name	Student ID	Grade as of September 2020

THIS APPLICATION CANNOT BE REVIEWED UNTIL ALL PREVIOUS FINANCIAL OBLIGATIONS HAVE BEEN MET.

In the event of a divorced family, both parents are required to apply for Tuition Assistance in order for the application to be considered.

A. CONTACT INFORMATION

(ANSWER ALL QUESTIONS. IF NOT APPLICABLE, ENTER "N/A". DO NOT LEAVE BLANK.)

FATHER:

Name and Title _____ Social Security Number _____

Home Address _____
Street Address _____ City _____ State _____ Zip _____

Home Telephone _____ Cell Phone _____

Email Address _____

Occupation _____ Position _____

Employer _____

Who are the owners and what is your relationship to the owners, if any? _____

For any corporate entity or partnership that you control or in which you own a majority interest or if you are self-employed, indicate net worth and profit or loss for your business(es) for most recent year: _____

Benefits provided by your company and estimated annual cost/value:

Health _____ Auto _____

Tuition reimbursements _____ Other: _____

MOTHER:

Name and Title _____ Social Security Number _____

Home Address _____
Street Address _____ City _____ State _____ Zip _____

Home Telephone _____ Cell Phone _____

Email Address _____

Occupation _____ Position _____

Employer _____

Who are the owners and what is your relationship to the owners, if any? _____

For any corporate entity or partnership that you control or in which you own a majority interest or if you are self-employed, indicate net worth and profit or loss for your business(es) for most recent year: _____

Benefits provided by your company and estimated annual cost/value:

Health _____ Auto _____

Tuition reimbursements _____ Other: _____

If father and/or mother hold more than one job, please photocopy this page and fill out above information in relation to each job.

Parent(s) is/are now (check all that apply)

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Married | <input type="checkbox"/> Separated | <input type="checkbox"/> Single Parent | <input type="checkbox"/> Divorced |
| <input type="checkbox"/> Father Deceased | <input type="checkbox"/> Mother Deceased | <input type="checkbox"/> Mother Remarried | <input type="checkbox"/> Father Remarried |

Document Checklist

The following information **MUST** be supplied with the tuition assistance application:

- Copy of your 2019 and 2018 year-end mortgage statements for all properties you own, including for your primary residence, secondary residence, time-share or business property.
- Copy of all leases (payment terms page only) and the most recent rent receipt or cancelled check for all properties you rent, including your primary residence and business property.
- Copy of both parents' valid driver's licenses.
- Copy of your 2019 real property tax bill(s).
- Copy of camp bills for all children and summer rental receipts or lease agreements. (See Section B.3)
- Copy of school bills (including college and graduate school) and scholarship decisions for all children for 2017-18, 2018-19, and 2019-20.(See Section B.2)
- Copy of bank statements for the months of January 2019 through February 2020. (See Section C)
- Copy of credit card statements and points/mileage statements for the months of January 2019 through February 2020.
- If separated or divorced, submit a complete copy of the divorce decree, separation agreement, or court order of support, verifying the party responsible for payment of tuition.
- Signed IRS Form 4506T (enclosed tax information authorization) for parents and children.

B. GENERAL (ANSWER ALL QUESTIONS. IF NOT APPLICABLE, ENTER "N/A." DO NOT LEAVE BLANK.)

Please use a separate piece of paper, if needed:

1. Please explain in detail the nature and cost of all extra-curricular, college prep, tutoring or weekend activities in which your child/ren participate(s) _____

2. Please list schools (other than Ramaz) that your children attend and any tuition assistance awarded in the last two years. PLEASE SUBMIT COPIES OF TUITION BILLS, LOANS & SCHOLARSHIP DECISIONS.

2018-2019:

Child's Name	Grade	School	Gross Tuition	Net Tuition After Assistance	Amount Actually Paid	Name of Person Who Paid

2019-2020:

Child's Name	Grade	School	Gross Tuition	Net Tuition After Assistance	Amount Actually Paid	Name of Person Who Paid

2020-2021

Child's Name	Grade	School	Gross Tuition	Net Tuition After Assistance	Amount Actually Paid	Name of Person Who Paid

3. Please list the name(s) of your child/ren and all summer camp (day or sleep-away) and other summer programs or activities attended for the summer of 2019 and to be attended in 2020. PLEASE SUBMIT COPIES OF ALL BILLS.

Child's Name	Camp/Program Activity	Cost	Source of Funds: Parent, Financial Aid, Loan, Other

4. Please list any trips or vacations that you or your family have taken in 2018 or 2019 or plan to take in 2020. Please include the cost and length of the trip and the means by which it was paid.

Thanksgiving	Destination	Cost	Name of Person Who Paid
2018			
2019			
2020			

Winter

2018			
2019			
2020			

Pesach

2018			
2019			
2020			

Summer

2018			
2019			
2020			

Other

2018			
2019			
2020			

5. Please list any purchases or expenditures of \$5,000 or more that you or your immediate family have made in 2018 and 2019 or plan to make in 2020, other than those already separately detailed on this Application. Do not include auto purchases or leases, tuitions, or other expenses that are separately detailed in Sections B or C.3.

Year	Description of Purchase	Cost	Name of Person Who Paid

6. Funding:

a. Do you receive any of the following funding subsidies?

Unemployment Severance Disability Food Stamps WIC Welfare Other _____

If any boxes are checked, please provide amount: _____

b. For 2018, 2019, or 2020, did you (or do you expect to) receive funding towards any of your family's expenses (including tuition) or any gifts in excess of \$1,000 per year from any source (parents, grandparents, extended families, etc.)? Yes No

If yes, please detail by year.

Year	Funding/Gifts (including amounts and description/explanation)
2018	
2019	
2020	

7. Miscellaneous:

a. Please indicate any synagogue or other community affiliations you may have: _____

b. Do you have household help? Yes No

If yes, please indicate how many days and hours per week and weekly cost: _____

c. Have you made a Bar/Bat Mitzvah and/or wedding this past year? Yes No If yes, please approximate cost: _____

d. Are you planning a Bar/Bat Mitzvah and/or wedding this year? Yes No If yes, please approximate cost: _____

e. Have you made any major home improvements this past year? Yes No If yes, please approximate cost: _____

f. Are you planning any home improvements this year? Yes No If yes, please approximate cost: _____

g. Have you purchased, rented or moved to a new primary or secondary residence this past year? Yes No

If yes, please approximate cost: _____

h. Are you planning on purchasing, renting or moving to a new primary or secondary residence this year? Yes No

If yes, please approximate cost: _____

C. PERSONAL ASSETS (FILL IN ALL BOXES. IF NOT APPLICABLE, ENTER "N/A." DO NOT LEAVE BLANK.)

Please supply the latest bank, brokerage and retirement statements. Please make sure to include all assets whether located in or out of the United States.

1. Assets	Current Value Parents	Current Value Children
Cash (total bank/checking accts, CDs, money market, etc.)		
Investments (stocks, bonds, mutual funds, etc.)		
Total Cash and Investments		

2. Real Estate*

Primary Residence

Secondary Residence

Current value	Current value
Purchase price	Purchase price
Year purchased	Year purchased
Down payment amount	Down payment amount
Current interest rate	Current interest rate
Amount remaining on mortgage	Amount remaining on mortgage
Years remaining on mortgage	Years remaining on mortgage

All other Real Estate (current value)	
All other investments, including investments in private securities, companies, partnerships, corporations, LLCs, etc. (higher of purchase price or current value)	

* Please include the information requested in this section with regard to all real estate directly or indirectly owned or leased by you or by any corporate entity, partnership, or other structure in which you own an interest. Please attach additional sheets as needed.

3. Transportation

Please provide information about all automobiles, boats and all other means of transportation owned or leased by you or provided to you or your family by any corporate entity or partnership:

Make	Make	Make
Model & Year	Model & Year	Model & Year
Year Purchased/Leased	Year Purchased/Leased	Year Purchased/Leased
Purchase Price	Purchase Price	Purchase Price
Monthly Lease Payment	Monthly Lease Payment	Monthly Lease Payment
Lease Expiration Date	Lease Expiration Date	Lease Expiration Date
Monthly Garage Costs	Monthly Garage Costs	Monthly Garage Costs

4. Other Assets – PLEASE PROVIDE ALL RELEVANT ACCOUNT STATEMENTS

	Value as of 12/31/2018	Amount you contributed in 2018	Amount employer contributed in 2018
401K/403B/Pension/IRA			
Trusts			
Other Partnership Interests			
Section 529			
Insurance Policies			

	Value as of 12/31/2019	Amount you contributed in 2019	Amount employer contributed in 2019
401K/403B/Pension/IRA			
Trusts			
Other Partnership Interests			
Section 529			
Insurance Policies			

D. ANNUAL INCOME (FILL IN ALL BOXES. IF NOT APPLICABLE, ENTER "N/A." DO NOT LEAVE BLANK.)

	2019 (actual)	2020(projected)
Father's salary & bonuses (match box 1 of W-2)		
Mother's salary & bonuses (match box 1 of W-2)		
Dividend/Interest (total all sources)		
Capital gain/loss		
All other investment income/losses (specify nature of investment)		
All business income/loss		
All non-taxable income (municipal bonds, etc.)		
Tax refunds (Federal, state, city)		
Pension/Disability/Unemployment Income		
Alimony/Child Support		
Untaxed income & benefits: deductible IRA and/or Keogh		
Tax deferred pensions & savings plans		
Earned Income Credit		
Housing, food, other allowances		
Gifts and/or assistance from family (See Section B.6.b above)		
Rental income		
K-1 Income (please submit all K-1's)		
Other sources of income		
Totals:		

E. MAJOR EXPENSES (FILL IN ALL BOXES. IF NOT APPLICABLE, ENTER "N/A." DO NOT LEAVE BLANK.)

(List total yearly expenses for each item)

	2019(actual)	2020(projected)
Rent		
Mortgage (principal and interest) (See Section D above)		
Real Estate Taxes		
Alimony/Child Support		
Car Loans/Lease Payments (total all cars) (See Section C.3)		
Garage Costs		
Child Care/Domestic Help (See Section B.7.b)		
Non-Ramaz Tuitions (See Section B.2)		
Summer Camp Tuitions (See Section B.3)		
Home Equity Loans		
Other Bank Loans		
Credit Cards		
Other		
Totals:		

G. ASSISTANCE REQUESTED

State the maximum amount of tuition you can afford to pay per child for each child attending Ramaz, inclusive of registration and fees in the coming year. \$ _____/child. *(Please note that this does not include transportation.)*

Please use the space below to provide any additional information that might help the Committee understand your application request and specifically how the amount of tuition that you can afford stated above was derived. (You may attach additional sheets.)

Please remember that the Ramaz Tuition Assistance Application should be submitted by April 22, 2020. If you have any questions concerning the Ramaz Tuition Assistance Application or the tuition assistance process, please email tuitionassistance@ramaz.org.

J. SIGNATURES

By your signature below, you authorize Ramaz to procure a consumer report, including an "investigative consumer report" containing information as to your character, general reputation, personal characteristics, and/or lifestyle, to investigate all statements made in connection with this scholarship application, and to obtain any transcripts, records or documents pertaining to your credit worthiness, background or education.

Should an investigative consumer report be requested, you have the right, upon written request, to be informed that such a report was requested, furnished with the name and address of the consumer reporting agency to whom such request was made, and provided with a complete and accurate disclosure of the nature and scope of the report requested. You hereby release, to the maximum extent permitted by law, Ramaz, and its officers, trustees, administrators, employees, and agents from any and all liability in connection with such reports and/or investigations.

By your signature below, you agree, upon request, to provide information that will verify the accuracy of any information included in your completed application. This information may include U.S. or state income tax forms that you filed or are required to file. Also, you hereby authorize Ramaz to verify any information reported on this application and on your tax returns with your accountant, and to share such information with any foundations or other organizations that are providing financial support to our tuition assistance program.

It is agreed that the grant of tuition assistance is conditioned on full payment, in a timely manner, of the reduced balance due under the enrollment contract. Ramaz will have the right to reverse tuition assistance in the event of payment default.

I/we hereby affirm, acknowledge and agree that (1) UNDER THE PENALTY OF PERJURY all answers given and all information provided on and in connection with this application (including on and in connection with all exhibits and attachments hereto and all other documents required hereunder) are true, accurate, complete and correct and that nothing has been omitted that makes any of the foregoing misleading or incomplete; (2) I/we are obligated to notify Ramaz, within 15 days, of any material change in my/our financial circumstances, which, for the avoidance of doubt, shall in all events include, but not be limited to (i) an increase in income or in net worth in each case greater than \$10,000 (excluding changes by virtue of value fluctuation of real estate or publicly traded securities already owned at the time of this application and listed hereon), (ii) any purchase of any primary or secondary residence, (iii) any change in employment status of either parent or (iv) the receipt of any gift, inheritance, bequest, damages award, judgment or other winnings in excess of \$10,000; and (3) that wherever "you," "your," "I," "we," "my" or "our" is used herein with respect to the Applicants, such terms shall, in each and every place in which they appear, also be deemed to include all trusts, corporate, and partnership entities in which either mother or father (or mother and father together) own a majority of the shares or interests, or have the power or authority, directly or indirectly, otherwise to control.

I/we further acknowledge and agree that if any of the foregoing representations are not true, complete, and correct, or are materially misleading, I/we shall (1) promptly return all grants and other forms of tuition assistance previously provided at any time (including for all prior years and to any of our children) by Ramaz, together with 12% interest from the date each such grant or other form of tuition assistance was awarded; (2) promptly reimburse Ramaz for any and all costs, fees, and expenses incurred in connection with this application, the enforcement of the rights of Ramaz hereunder and the return of funds in clause (1) above, including without limitation, the costs, fees, and expenses in connection with all attorneys (whether or not originally acting on a pro bono publico basis), accountants, investigators, and courts; and (3) be precluded and disqualified from applying for any future tuition assistance from Ramaz.

Any false statement or omission made in connection with this application may result in referral for criminal prosecution.

_____	_____
Date	Signature of Mother
_____	_____
Date	Signature of Father

Decision of Tuition Assistance Committee: _____

APPROVED: _____