

**2010 /2011 CONFIDENTIAL FINANCIAL ASSISTANCE FORM
 RABBI BERNARD S. RASKAS RELIGIOUS SCHOOL
 ROSSY & RICHARD SHALLER HEBREW SCHOOL**

We confidentially provide tuition assistance by reviewing and balancing families' need,
 number of requests and available scholarship dollars.

NAME OF APPLICANT 1:	NAME OF APPLICANT 2:
EMAIL ADDRESS:	EMAIL ADDRESS:

DEPENDENT CHILDREN

FIRST NAME:	LAST NAME:
#1	
#2	
#3	

APPLICANT #1	APPLICANT #2
MONTHLY SYNAGOGUE DUES:	MONTHLY SYNAGOGUE DUES:
ARE YOU CURRENTLY EMPLOYED?	ARE YOU CURRENTLY EMPLOYED?
EMPLOYER	EMPLOYER
OCCUPATION	OCCUPATION
LENGTH OF TIME WITH EMPLOYER:	LENGTH OF TIME WITH EMPLOYER:
MONTHLY GROSS:	MONTHLY GROSS:
OTHER INCOME:	OTHER INCOME:

TOTAL TUITION: _____ **ASSISTANCE REQUIRED:** _____

The Tuition Assistance Committee will review fully completed forms and share the decision. Please return your completed form by **June 25, 2010**.

 Date Signature of Applicant #1

 Date Signature of Applicant #2