

# Application for Tuition Adjustment

The Hasten Hebrew Academy of Indianapolis  
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## Introduction

The Hasten Hebrew Academy of Indianapolis provides adjusted tuition to families in pursuit of Jewish education for their children through a Jewish day school experience.

Tuition adjustment represents one of the many ways the Hasten Hebrew Academy fulfills its mission of maintaining and strengthening Jewish life in Indianapolis. Tuition adjustments are funded from the generosity of donors to the school, through fundraising efforts of volunteers, and subsidies from the Jewish Federation of Greater Indianapolis and The Hasten Hebrew Academy Foundation.

The following application is The Hasten Hebrew Academy's basis for making a decision regarding your tuition adjustment request.

We request that you complete the application ending with your signature verifying the information.

Please return the completed Tuition Adjustment Application to the Hasten Hebrew Academy. by May 1, 2007. Applications are reviewed by the tuition adjustment committee. All application forms and information are held in the strictest confidence. The Hasten Hebrew Academy feels strongly that the success of its tuition adjustment program depends heavily on the confidentiality of financial information.

*NOTE: All tuition adjustments are reviewed periodically throughout the year. Adjustments in the amount of assistance awarded may be made based upon changes in a recipient's financial circumstances.*

Family Name \_\_\_\_\_ Date \_\_\_\_\_

**Confidential**

**GENERAL INFORMATION** – Please provide information about both parents even if they are not living together. Please check the appropriate space to indicate address where child most frequently resides.

**Parent #1** \_\_\_\_\_ Most frequent address

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

(Cell) \_\_\_\_\_ Email \_\_\_\_\_

**Parent #2** \_\_\_\_\_ Most Frequent Address

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

(Cell) \_\_\_\_\_ Email \_\_\_\_\_

*List all children currently attending or planning to attend Hasten Hebrew Academy for the 2007-2008 school year.*

*Please list any OTHER children in your household.*

**Name of Student      Age      Grade**

**Name of Student      Age      Grade      School Attending      Cost**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**INCOME INFORMATION**

**Parent #1    Job Title** \_\_\_\_\_

**Name of Employer** \_\_\_\_\_ **Length of time at this job** \_\_\_\_\_

**Employer's Address** \_\_\_\_\_

**Employer's Phone** \_\_\_\_\_

**Adjusted Gross Income 2006** \_\_\_\_\_

**Does not work** \_\_\_\_\_

\_\_\_\_\_

**Parent #2    Job Title** \_\_\_\_\_

**Name of Employer** \_\_\_\_\_ **Length of time at this job** \_\_\_\_\_

**Employer's Address** \_\_\_\_\_

**Employer's Phone** \_\_\_\_\_

**Adjusted Gross Income 2006** \_\_\_\_\_

**Does not work** \_\_\_\_\_



I / we have carefully reviewed my / our family resources and believe that the maximum amount I / we can pay to the Hasten Hebrew Academy of Indianapolis for the upcoming school year is \$ \_\_\_\_\_ (annual total).

### **PARENTS’/GUARDIAN’S STATEMENTS**

- I / We certify that the information submitted on this application is accurate and complete to the best of my / our knowledge.
- I / We agree to notify the Hasten Hebrew Academy promptly if my / our financial condition changes.
- I / We understand that tuition adjustments are offset in part through fund-raising and volunteer services. I / We agree to assist in such activities to the maximum extent I am / we are able.
- I / We understand that tuition adjustment decisions are made on the basis of this written record.

### **THIS APPLICATION MUST BE SIGNED BY BOTH PARENTS / GUARDIANS**

**Print Name** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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