TUITION COMMITTEE				
DATE:	AMT:			
APP:	TCA:			

Confidential Tuition Reduction Application Baltimore Jewish Day Schools 2025-2026 / 5785

This consolidated Tuition Reduction Application form has been designed to capture all of the information that each of the schools requires. For those families with children going to more than one school, parents are instructed to complete this form and send copies of it to each applicable school. Please fill in all items on this form. If an item is not applicable to you, please enter "NA" in the space provided. Your application will NOT be processed if it has incomplete information or if you do not attach all necessary supporting documentation.

As tuition paying parents ourselves, we understand the difficulty not only of the financial burden that tuition imposes, but the discomfort inherent in the scholarship process. As committee members, we try to balance the difficult task of ensuring that our schools meet their budgetary needs while attempting to minimize the tuition burden on parents as much as possible.

THER'S EMAIL: ER'S EMPLOYER: OTHER'S EMAIL:
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THER'S EMPLOYER:
even those not yet in school, in the table below.

CHILD'S NAME	AGE	GRADE 2025-26	Name of Educational Institution this child is attending in 2025-26	Tuition Paid 2024-25	Tuition Proposed By parent 2025-26
1					
2					
3					
4					
5					
6					
7					
8					

INCOME:	\$
Total 2024 gross income from Father:	
Total 2024 gross income from Mother:	
Total family support:	
Total child support:	
Total Parsonage:	
Total other income (Government benefits)	
Total 2024 income including all 6 lines above:	
Total expected combined income (father, mother, other) for the current year 2025 :	
Please attach your completed 2024 tax return with all applicable schedules and fo	orms.
If you have not yet filed, please attach the prior year's tax return. If you filed a separate tax return for your business, please attach a copy of that re	turn.
EXPENSES:	\$
Mortgage or Rent per month:	T
Last year's out of pocket medical expenses (Include premiums and expenses):	
Car payments per month: (Loans, Insurance, Other)	
Annual cost to support married children and/or parents:	
Monthly contributions to all retirement accounts:	
Monthly money earmarked for savings (simchas, etc.):	
Projected Special Education / Tutoring Expenses:	
Annual cost of vacations (If not self-paid, who paid?)	
Annual cost of cleaning help (If not self-paid, who paid?)	
Overnight Summer Camps (If not self-paid, who paid?)	
Home renovations/Additions (over the last three years)	
Total Maaser given in 2024:	
Open Pledges: Indicate Organization & Amount: Current Year Pledge: School: Amount: Current Year Pledge: School: Amount: Long-term pledge: School:	
ASSETS:	\$
Current Value: Cash, Savings and Checking accounts:	
Current Value in 401K and all other retirement accounts:	
Home: Purchase Date: Purchase price:	
Balance due on current home:	
Do you own additional Real Estate? If so, what is the value?	
Total of Other Investments (ex. Stocks/Bonds/Mutual Funds/CD's):	

	Make/Model:		
	Make/Model:		
Car #3: Year:	Make/Model:		
DEBT Total owed to Gr	mache:		
Total owed on Cr	redit Cards:		
Total owed to far	mily:		
Total owed to ot	hers: (student loans, etc.):		
Have you applied Amount received If you live in Balt If not, please cor provide significa Please describe i	d from the 529 Match: \$timore City, have you applientact the Business Office annt help with tuition expens	ution Programs - MD 529? YES ed to the Children's Scholarship Food someone will explain the application for reduced tuition: (include	
		SIGNATURES (UNSIGNED FORMS WILL BE RETURN	NED)
in tuition, if grar ability to pay an	nted, is subject to reconsided I/we pledge to report s	eration at any time upon a mate	s complete and true. I/we agree that a reduction erial change in circumstances involving my/ou promptly. I/we grant permission to the tuition reparer:
first priority in tz this application, Baltimore mosdo	edakah allocations, especio we agree to direct a substa	ally for individuals who receive tu ntial amount of our charitable co	ts support in making our community schools the sition reductions. By completing and submitting ontributions during the upcoming school year to check to schools which
S	ignature: Father		Date:
S	ignature: Mother		Date: