



**SAR ACADEMY**  
**SAR HIGH SCHOOL**  
 655 WEST 254TH ST., RIVERDALE, NY 10471  
 TEL: (718) 548-1717 • FAX: (718) 543-5080

School Year: 2022/2023

<i>For Office use only:</i>	
No. C	_____
G	_____
TC	_____
PY	_____
OB	_____

**APPLICATION FOR TUITION ASSISTANCE**  
 (The information herein will be maintained in strict confidence)

The information in this application is given for the purpose of inducing SAR to grant a scholarship and the undersigned represents that all statements made herein are true. The undersigned will promptly notify SAR of any material change in circumstances, and understands that any misrepresentation, failure to supply a material fact, or failure to advise of any material change in circumstances, may result in denial or forfeiture of tuition assistance. All questions must be answered; if not applicable mark "N/A." The committee may request additional information or verification of any representation made.

**A. Family Information**

1. Family Name \_\_\_\_\_ Home Tel. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_

2. Parent 1 Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Cell Phone. \_\_\_\_\_ Email. \_\_\_\_\_  
 Birth date \_\_\_\_\_ Highest Grade of Education \_\_\_\_\_

3. Parent 2 Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Cell Phone. \_\_\_\_\_ Email. \_\_\_\_\_  
 Birth date \_\_\_\_\_ Highest Grade of Education \_\_\_\_\_

4. Are parents divorced \_\_\_\_\_ Legally separated \_\_\_\_\_  
 Either of child's parents deceased \_\_\_\_\_

**B. School Information- (please list all children in family)**

Child Name	School Attending 21/22	Grade 21/22	Tuition Obligation 21/22	Applying to SAR for 22/23
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>

**C. Camp Information- (please list all children in family)**

Child Name	Summer Program Summer 2021	Cost of Summer Program	Summer Program Summer 2022	Cost of Summer Program

**D. EMPLOYMENT**

**Parent 1**

Employer \_\_\_\_\_ Job Description \_\_\_\_\_ # of years \_\_\_\_\_  
 Address \_\_\_\_\_  
 Annual Pay \$ \_\_\_\_\_ Annual Bonus: \$ \_\_\_\_\_  
 Are you self-employed? \_\_\_\_\_ Are you a stockholder in the firm? \_\_\_\_\_  
 If the firm owned in any part by you/ Parent 2's family? \_\_\_\_\_  
 Retirement Plans: Annual Contribution \$ \_\_\_\_\_ Current Balance \$ \_\_\_\_\_

**Parent 2**

Employer \_\_\_\_\_ Job Description \_\_\_\_\_ # of years \_\_\_\_\_  
 Address \_\_\_\_\_  
 Annual Pay: \$ \_\_\_\_\_ Annual Bonus:\$ \_\_\_\_\_  
 Are you self-employed? \_\_\_\_\_ Are you a stockholder in the firm? \_\_\_\_\_  
 If the firm owned in any part by you/ Parent1's family? \_\_\_\_\_  
 Retirement Plans: Annual Contribution \$ \_\_\_\_\_ Current Balance \$ \_\_\_\_\_

**E. FINANCIAL**

1. Do you (Parent 1/ Parent 2) own a home? \_\_\_\_\_ Co-op \_\_\_\_\_ Summer/ Winter Home or Apt. \_\_\_\_\_  
 Purchase Price \$ \_\_\_\_\_ Date of Purchase \_\_\_\_\_  
 Original Mortgage \$ \_\_\_\_\_ Present Balance \$ \_\_\_\_\_  
 Monthly Mortgage Payment \$ \_\_\_\_\_ Monthly Real Estate Taxes \$ \_\_\_\_\_  
 Annual Home Insurance \$ \_\_\_\_\_ Monthly Maintenance \$ \_\_\_\_\_  
 Do you rent? \_\_\_\_\_ Monthly rental? \_\_\_\_\_ No. of years at present address \_\_\_\_\_

2. Line 7 (adj. gross income) of latest 1040 Federal Tax Return \$ \_\_\_\_\_

3. Other/ Outside Income

	Parent 1	Parent 2
Self Employment	\$ _____	\$ _____
Fees/ Commissions	\$ _____	\$ _____
Dividends	\$ _____	\$ _____
Interest	\$ _____	\$ _____
Rentals	\$ _____	\$ _____
Child Support	\$ _____	\$ _____
Other	\$ _____	\$ _____

4. Banking– Name and Addresses of Banks at which family maintains accounts

*Savings Account*

Name \_\_\_\_\_ Address \_\_\_\_\_ Acct # \_\_\_\_\_ Present Balance \$ \_\_\_\_\_  
 Name \_\_\_\_\_ Address \_\_\_\_\_ Acct # \_\_\_\_\_ Present Balance \$ \_\_\_\_\_

*Checking Account:*

Name \_\_\_\_\_ Address \_\_\_\_\_ Acct # \_\_\_\_\_ Present Balance \$ \_\_\_\_\_  
 Name \_\_\_\_\_ Address \_\_\_\_\_ Acct # \_\_\_\_\_ Present Balance \$ \_\_\_\_\_

*Money Market Account*

Name \_\_\_\_\_ Address \_\_\_\_\_ Acct # \_\_\_\_\_ Present Balance \$ \_\_\_\_\_  
 Name \_\_\_\_\_ Address \_\_\_\_\_ Acct # \_\_\_\_\_ Present Balance \$ \_\_\_\_\_

5. Do any of your children have Trust, Guardianship, or Gift to Minor Accounts? \_\_\_\_\_ Amt. \$ \_\_\_\_\_

6. Has your family received financial assistance from other sources, such as relatives, grandparents, etc. Amt. \$ \_\_\_\_\_

7. Do you complete your own tax returns? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, give name address, phone number of person who does \_\_\_\_\_

8. List all other assets (Stock, Bonds, US Bonds, Properties and Values, CD's etc.)

_____	Amt. \$ _____
_____	Amt. \$ _____
_____	Amt. \$ _____
_____	Amt. \$ _____

**F. Family's Monthly Obligations/ Payments: (approximate)**

Car/ Loans \$ \_\_\_\_\_ American Express \$ \_\_\_\_\_ Visa \$ \_\_\_\_\_  
 Medical \$ \_\_\_\_\_ Master Charge \$ \_\_\_\_\_ Gas Cards \$ \_\_\_\_\_  
 Bank Loans \$ \_\_\_\_\_ Store Charge: Name \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 Domestic Help \$ \_\_\_\_\_ Name \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 Other \_\_\_\_\_

**G. Other**

1. Does the family own a car \_\_\_\_\_ Does the family lease a car \_\_\_\_\_ Total # of cars in family \_\_\_\_\_  
 Year \_\_\_\_\_ Make and Model \_\_\_\_\_; Year \_\_\_\_\_ Make and Model \_\_\_\_\_  
 Year \_\_\_\_\_ Make and Model \_\_\_\_\_; Year \_\_\_\_\_ Make and Model \_\_\_\_\_

2. Vacations

List Parent or family vacations taken in the past two years

Last year– Where \_\_\_\_\_

Previous year– Where \_\_\_\_\_

**H. Assistance Requested**

Amount we can pay for the school year \$ \_\_\_\_\_

**I. Additional Comments:**

**I/We hereby consent to SAR obtaining a report of my credit record and using the information from that report in determining whether to grant a scholarship .**

**I/We understand that all scholarships offered by SAR are moral scholarships and I/We recognize that if we are granted a scholarship by SAR then we will have a future moral obligation to support the SAR Scholarship Fund to the best of our ability. If financial circumstances allow, we will repay the amount of any scholarship received.**

**I/We affirm that the above information is accurate and complete and agree to advise the school promptly of any changes in the above information.**

SIGNATURES: \_\_\_\_\_ Parent 1 Date: \_\_\_\_\_

\_\_\_\_\_ Parent 2 Date: \_\_\_\_\_

**\*Applications will not be complete and will not be reviewed until all required submissions are received. See Page 4 for a list of required submissions.**

EMAIL TO: Debra Eis at deis@saracademy.org

For questions contact Debra May, Executive Director at 347-274-3620 or debra@saracademy.org.

**Required Submissions\*:**

**All applications must be signed by both parents and must include the following submissions—**

- 1. Full and COMPLETE Form 1040 Federal Tax Form, W2's, 1099's, for both Parent 1 and Parent 2, as well as NY State Tax Form for two most current years filed, including cancelled checks for taxes paid with filed returns.**
- 2. If self-employed, partner or stockholder, furnish complete business returns for the past two years.**
- 3. Year end mortgage statement and most recent monthly statement for all owned properties.**
- 4. Property tax bill for most recent year for all owned properties.**
- 5. Copy of current lease and most recent canceled rent check.**
- 6. Bank statements for all accounts for the 12 month period prior to submission of this application including thumbnail copies of all checks written.**
- 7. Year end brokerage statement for all brokerage accounts and most recent monthly/quarterly statement for all accounts.**
- 8. Year end credit card summary statement for all credit and store accounts or credit card/store card statements for the 12 month period prior to submission of this application.**
- 9. Signed IRS form 4506T (Request for Transcript of Tax Return)**
- 10. Submission of on-line FACTS application at [www.factstuitionaid.com](http://www.factstuitionaid.com).**

\* ALL FAMILIES, even those who applied to SAR for financial assistance for the 2021/22 school year, are required to submit all items above

**PLEASE DO NOT WRITE BELOW THIS LINE**

DATE	COMMITTEE MEMBERS	NO. OF CHILDREN	ACTUAL TUITION	SCHOLARSHIP GRANT	TUITION DUE	REMARKS