



OHR REUVEN אור ראובן

Harav Bezalel Rudinsky
ROSH HAYESHIVA

Harav Benzion Brodie
S'GAN ROSH HAYESHIVA

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MENAHEL, MESIVTA

Rabbi Yosef B. Rawicki
MENAHEL, YESHIVA KETANA

Rabbi Y. Bentzion
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Rabbi Raphael Vilinsky
S'GAN MENAHEL, MESIVTA

Mr. Boruch Rudinsky
PRINCIPAL, MESIVTA

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PRINCIPAL, YESHIVA KETANA
ASSOCIATE PRINCIPAL, MESIVTA

Rabbi Boruch Vann
ASSISTANT PRINCIPAL, MESIVTA

Mrs. Shani Plotzker
PRESCHOOL DIRECTOR
STUDENT SERVICES, LOWER ELEMENTARY

Dovid Yoseph Berman
EXECUTIVE DIRECTOR

Mrs. Nechama Weitz
DIRECTOR OF ADMISSIONS

OVERVIEW TO THE TUITION ASSISTANCE APPLICATION PROCESS

Dear Parents,

Applying for tuition assistance is a step that is never taken lightly, and we are well aware of the discomfort involved in doing so. We strive to make our tuition assistance process as dignified and respectful as possible. We recognize that, under current conditions, families that have never before requested tuition assistance may need to do so.

Addressing tuition assistance requests requires us to balance the needs of our parent body for whom the tuition burden may be excessive with the duty to support the financial realities of running a Yeshiva. The balance of those responsibilities is magnified in the current financial situation. Please understand that our duty to the Yeshiva and to the parent body as a whole demand that all tuition assistance requests go through the proper application and review process. It would be irresponsible for us to grant any request without proper documentation and review.

In order to do justice to any scholarship granted, we ask any parents requesting tuition assistance to complete the attached Tuition Assistance Application Form in its entirety and to provide all the requested supporting documentation from the checklist on the following page. This allows for an amount to be determined based on the actual financial situation. Applications are subject to availability. If there are factors that you feel are important, but not addressed in the actual application, please utilize the "explanation" section or attach any additional information.

Please rest assured that we understand the sensitivity of this information and it is kept strictly confidential. We do not share the information in any manner other than with the necessary tuition committee members and essential office personnel. If you have any questions, please do not hesitate to contact the Business Office at 845.362.8362, x 108 or by emailing businessoffice@ohrreuven.com.

Sincerely,

The Tuition Committee

Important Note:

- Tuition Assistance Applications received after June 15th, will incur an additional processing fee:
 - After June 15th, applications must be accompanied with a **\$75.00** late processing fee.

Chinuch for Life

YESHIVAS OHR REUVEN
The Lupin Campus
259 Grandview Avenue
Suffern, NY 10901
P. 845.362.8362
F. 845.352.9593
office@ohrreuven.com
www.ohrreuven.com



TUITION ASSISTANCE APPLICATION CHECKLIST AND NOTES

CHECKLIST:

Completed and signed Tuition Assistance Application Form

Federal Tax Form 1040, W2s & 1099s for 2021 & 2022(if available) for both husband and wife (if filing separately) including all schedules and attachments

If you are the owner of a business, a copy of the last two years of Federal Tax filings in addition to the above

A copy of your current pay stub (and spouse's if applicable)

Copies of all credit card bills for the last 6 months

Copies of all current bank statements for the last 6 months

NOTES:

- This Tuition Assistance Application can be printed and completed by hand or downloaded/saved and filled in as a PDF form.
- You **still qualify for the registration discount** if you return the other registration forms along and the completed tuition assistance application by May31st.
- Usually no tuition assistance is available for Kindergarten tuition.
- Please provide an explanation for any missing information.
- It may take some time between when an application is submitted and when a determination is available. The Business Office will be in touch with you when a determination is reached.

Please submit the Tuition Assistance Application to the Business Office.

EMAIL: businessoffice@ohrreuven.com; **FAX:** 845-352-9593 – Attn: Business Office; **MAIL:** Yeshivas Ohr Reuven, Attn: Business Office, 259 Grandview Ave, Suffern, NY 10901.

YESHIVAS OHR REUVEN TUITION ASSISTANCE APPLICATION FORM

PLEASE ANSWER ALL QUESTIONS. DO NOT LEAVE BLANKS.
FILL IN "0", "NONE", "N/A" (NOT APPLICABLE) WHERE APPROPRIATE.

APPLICATIONS MUST BE COMPLETE TO BE REVIEWED.
PLEASE SEE THE LETTER, CHECKLIST AND NOTES ON THE PRECEEDING PAGES.
This Tuition Assistance Application can be printed and completed by hand or downloaded/saved and filled in as a PDF form. It should be emailed to businessoffice@ohrreuen.com along with the required documentation. Thank you.

Family Name _____ Father _____ Mother _____

Marital Status: (please check one)

_____ Married _____ Single parent supporting children alone _____ Single parents sharing expenses
(both parents are required to submit documentation)

Address _____ City/State/Zip _____

Home telephone # _____ Business # _____

Father cell phone # _____ Mother cell phone # _____

E-mail address _____ Fax # _____

If responsible party address is different from above, please complete

Address _____ City/State/Zip _____

Home telephone # _____ Business # _____

Cell phone # _____ E-Mail / Fax # _____

Are both mother and father totally responsible for financial support of children? Yes _____ No _____ if no, please explain exact arrangement _____

Total # of children in household _____

Total # of children to be registered in Yeshivas Ohr Reuven _____

SCHOOLING

Children to be enrolled in Yeshivas Ohr Reuven. Please indicate grades for the 2023-2024 school year

Child's name	Grade	Child's name	Grade
1.		4.	
2.		5.	
3.		6.	

Children enrolled in **other schools** or childcare programs: (If more space is required, use reverse or an additional paper)

Child's name	Grade for 2023-2024	School or Program 2023-2024	School or Program 2023-2024	Your tuition obligation for 2022-2023 was:	Your tuition obligation for 2023-2024 (if known)
1.				\$	\$
2.				\$	\$
3.				\$	\$
4.				\$	\$
5.				\$	\$

Camps / Summer Programs

Child's name	Overnight Camp/Day Camp	Total Paid for 2022 (Include <u>all</u> camp charges)	Total Fees to be Paid for 2023 (if known)
1.		\$	\$
2.		\$	\$
3.		\$	\$
4.		\$	\$
5.		\$	\$

INCOME

List all income on an annual basis

Income	Father (Actual 2022)	Mother (Actual 2022)	Father (Est. 2023)	Mother (Est. 2023)
GROSS earnings (include all tax-exempt amounts)	\$	\$	\$	\$
Variable Compensation, e.g., bonus, incentive, commission	\$	\$	\$	\$
Interest and Dividends: (please include combined dividends, interest and taxable pensions)	\$	\$	\$	\$
Annual contributions to IRA's, Keoghs, 401-K's & other tax sheltered annuities	\$	\$	\$	\$
Aid to Dependent Children (ADC) or any General/Public Assistance (i.e. HUD, WIC, SSI, food stamps)	\$	\$	\$	\$
Do you receive Medicaid?	() Yes () No	() Yes () No	() Yes () No	() Yes () No
Net Rental Income	\$	\$	\$	\$
Gifts or other private income (e.g.; Grandparents, Foundations, Charities)	\$	\$	\$	\$
Other Income (Specify)	\$	\$	\$	\$
Total Gross Income	\$	\$	\$	\$
Combined Gross Income	2022 \$		2023 \$	

NON RECURRING INCOME

List any non-recurring income (e.g. inheritance, gift, insurance settlement etc.) greater than \$5000 received by any family member or other special income not reflected above, for the past 5 years.

NON SALARY BENEFITS

Parsonage, Subsidized Housing, Tuition Reduction Specify _____
Actual Value \$ _____

Is a portion of your tuition payments available from another source, e.g. grandparents, employer match, etc.? Yes/No If so, please provide details

EXPENSES

Housing: Monthly mortgage \$ _____ or monthly rent \$ _____ Does mortgage payment include real estate taxes? Yes _____ No* _____ *If no, how much is your total annual real estate taxes: \$ _____	
Medical/dental expenses paid (Include only expenses not covered by insurance. You may include cost of medical insurance premiums you paid)	\$ _____
Medical insurance paid by you and not your employer	
Other (Specify)	\$ _____
Other (Specify)	\$ _____
Other (Specify)	\$ _____
Where does your family spend summer? (Please include Name and Location) How much did you spend?	\$ _____

ASSETS

Year Purchased (Home)		Purchase price	\$
Amount you owe on your home – 1 st mortgage	\$	2 nd mortgage	\$
Net Value \$			
Has this home had any remodeling work done since its original purchase? If yes, what year?		Cost	\$
Net value of real estate other than your home – both personal and business	\$		
Debt that you own partially or entirely	\$		
Market value of stocks, bonds and investments			\$
Cash in the bank- checking, money market, savings, CDs etc.	\$		
Other IRA, Roth etc (Please Specify)			\$

	(Please list all cars you or any family members own/lease)				Total Annual Payments (Loan/Lease, Insurance etc.)	
	Year	Make	Model	Own/Lease		
Car #1					\$	
Car #2					\$	
Car #3						
Car insurance cost annually					\$	

FAMILY EMPLOYMENT

Husband:

Occupation: _____ Are you Self-Employed? () Yes () No

Name of Company: _____ If self-employed - # of Employees _____

Address: _____ City/State/Zip _____

Job Title: _____ Job Description: _____

Type of Business / Services provided? _____

() Full Time () Part Time _____ hours per week

Wife:

Occupation: _____ Are you Self-Employed? () Yes () No

Name of Company: _____ If self-employed - # of Employees _____

Address: _____ City/State/Zip _____

Job Title: _____ Job Description: _____

Type of Business/Services provided? _____

() Full Time () Part Time _____ hours per week

If you have any additional jobs, please list below:

Name	Employer	Position	Hours per week	Salary
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please indicate if your occupation includes any goods and services that can benefit the yeshiva as part of your scholarship (For example- computer help, electrical, telephones, school supplies, advertising, etc). _____

EXPLANATIONS

Report any special circumstances or additional information you would like considered. If a parent is presently unemployed and / or expects an income decrease in 2023 give specific details. Please answer this question as fully as possible. If preferred, attach a separate explanation file to your application.

Amount of total obligation for my children enrolled at Yeshivas Ohr Reuven (see your family's tuition contract):	\$
Amount of tuition assistance that you are requesting the Yeshiva to subsidize:	\$
Total obligation that you are requesting to pay for all of the students that you have enrolled in Yeshivas Ohr Reuven:	\$

AREAS WHERE I CAN VOLUNTEER MY SERVICES:

It is understood that all applicants for tuition assistance must volunteer at **least 30 hours per school year** on any of the below listed activities. Check all that are applicable. Must be completed.

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Writing/Editing | <input type="checkbox"/> Substitute classroom | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Graphics | assistance | |
| <input type="checkbox"/> Supervision during | <input type="checkbox"/> Office assistance | |
| after-school activities | <input type="checkbox"/> Gym | |

Rabbinical Reference Contact Information

Name: _____ Address: _____ Telephone Number: _____

Name of Shul or other organization: _____

AGREEMENT

AS A TORAH JEW, I HEREWITH AFFIRM THAT THE INFORMATION CONTAINED HEREIN AND THE DOCUMENTS, WHICH I HAVE SUBMITTED HEREWITH, ARE TRUE AND CORRECT. I FULLY UNDERSTAND THAT ACCEPTANCE OF TUITION ASSISTANCE MONEY REQUIRES ME TO PARTICIPATE IN THE YESHIVA'S FUNDRAISING PROJECTS COMMENSURATE WITH THE AMOUNT OF SCHOLARSHIP. I AM AWARE THAT SHOULD THE COMMITTEE FIND ANY INCONSISTENCIES IN MY DECLARATIONS CONCERNING MY FINANCES THAT I WILL FORFEIT ALL RIGHTS TO FINANCIAL ASSISTANCE. IT IS UNDERSTOOD THAT SHOULD MY FINANCIAL CIRCUMSTANCES CHANGE APPRECIABLY AT ANY TIME IN THE FUTURE, I WILL BE EXPECTED TO REIMBURSE TO THE YESHIVA THE FULL AMOUNT OF THE TUITION ASSISTANCE GRANTED. I ALSO UNDERSTAND THAT THE YESHIVA RESERVES THE RIGHT TO REEVALUATE THE TUITION ASSISTANCE GRANTED DURING THE 2023-2024 SCHOOL YEAR, AND A CHANGE IN MY FINANCIAL STATUS REQUIRES MY NOTIFYING THE YESHIVA.

Parent Signature _____ **Date** _____

Parent Signature _____ **Date** _____