

LUBAVITCH GIRLS HIGH SCHOOL OF CHICAGO

APPLICATION FOR SCHOLARSHIP ASSISTANCE-SCHOOL YEAR 2025-2026

Students Name(s)_____

Date of Birth_____ Entering Grade(s)_____

Address_____ Phone (____)_____ Cell (____)_____

School attended last year_____

Tuition Paid last year_____

Father's Name_____ Occupation_____

Work's Name_____ Years there_____

Work's Address_____ Phone(____)_____

Mother's Name_____ Occupation_____

Work's Name_____ Years there_____

Work's Address_____ Phone(____)_____

Number of exemptions claimed for 2023 _____

<u>NAME</u>	<u>AGE</u>	<u>NAME</u>	<u>AGE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

1) TOTAL GROSS FAMILY INCOME

ACTUAL 2024ESTIMATED 2025

a) Salaries

1) Father \$_____

2)Mother _____

3) Business Income _____

b) Other Taxable Income _____

TOTAL

c) Non-Taxable Income:

Parsonage

Home-Based Business _____

Tuition benefits _____

d) Total Gross Family Income \$_____

(Add items a, b, c)

What is the monthly and annual amount you take home after taxes? _____

Do you have a part time or full time cash or side business? Explain your answer.

2. Do you own a home? _____

If yes, answer the following:

Year purchased:_____ Price purchased:_____ Annual real estate taxes:_____

Monthly payments: _____ Monthly utilities: _____ Amount of equity owned: _____

If no, list your monthly rent: _____

3. If you own other real estate and/ or have investments:

a) What is the combined worth today? _____

Amount of stocks, Bonds, CD's, held in non retirement accounts: \$ _____

If you have a 529 Savings Account, how much do you have saved? \$ _____

Do you own or lease a car? _____

What make, model and year car/van do you have? _____

How much do you spend on vacations on average each year? _____

What after school activities do your children go to? _____

5) NAME, AGE, SCHOOL AND TUITION FOR EACH DEPENDENT IN YOUR FAMILY

<u>Name</u>	<u>Age</u>	<u>School</u>	<u>Tuition Paid 2024-2025</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Below or on a separate sheet of paper, you may explain any additional information to take into consideration

NOTE: All applications must include a completed and signed Income Tax form for the past two years, including all schedules, before they will be accepted. A letter from your family Rabbi supporting the need for a scholarship.

I declare that the information reported on this application to be the best of my knowledge and belief, is true, correct and complete.

Date_____

Signature_____

All information will be kept strictly confidential and for your protection this application will not be kept in the school office.

Please mail to:

Lubavitch Girls High School

Attention: **SCHOLARSHIP COMMITTEE**

6350 N. Whipple St.

Chicago, IL 60659