



# Torah Day School of Ottawa

## Tuition Subsidy Application Form

1119 Lazard Street  
 Ottawa, Ontario K2C 2R5  
 Tel. 613-274-0110  
 Office@torahday.ca

*In order to assess applicants in a standard manner, please provide the following information.*

Father's Name:	Tel (H):
Father's Occupation:	Tel (W)
Mother's Name	Tel (H):
Mother's Occupation:	Tel (W)
Number of Dependent Children:	
Number of Children in Torah Day:	

Name of Dependent Children	Age	School/Childcare Attending 2017-18	Full Tuition Amount	Tuition You Expect to Pay

1) Please list all income or sources of funds not included in your tax return (including money earned from any type of work, gifts or support from family).

<u>Source of Income</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

2) Please list the total value of assets you own both in Canada and outside Canada (not including your principal residence).

Real estate	\$ _____
Registered Retirement Saving Plan (RRSP)	\$ _____
Registered Educational Saving Plan (RESP)	\$ _____
Tax Free Savings Account (TFSA)	\$ _____
Stocks, bonds, securities, savings accounts	\$ _____
Ownership or interest in any trust, estate, business or similar entity	\$ _____

3) Please list any debt that you are carrying (not including the mortgage on your principal residence).

<u>Type of Debt</u>	<u>Amount Owed</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

4) Please list amounts spent for the following items this year:

Vacations	\$ _____
Summer camps	\$ _____
Private lessons	\$ _____
Household help	\$ _____
Gym, JCC or other Club Membership	\$ _____

5) Please list significant purchases made in the past year or that you expect to make this coming year.

Item \_\_\_\_\_

Item \_\_\_\_\_

Item \_\_\_\_\_

6) Total expected family income for 2017-2018 from all sources, including salary, benefits, investments etc.

\$ \_\_\_\_\_

7) Total tuition you feel you can afford to pay

\$ \_\_\_\_\_

8) You may also include a description of extenuating circumstances relating to your specific financial situation.

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

**Please provide copies of your 2016 Income Tax Return (for both parents) as well as copies of your Notices of Assessment from the Canada Revenue Agency.**

Please return the completed form by May 15, 2017 in a sealed envelope, marked **“Confidential”** and to the **Attention of Tuition Subsidy Committee**. The envelope may be returned to the office for forwarding.

\_\_\_\_\_  
Father's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother's signature

\_\_\_\_\_  
Date