

Midreshet Torah V'Avodah Scholarship Application

Please complete these four pages, add the necessary tax forms, and scan and email to our office at office@tvaisrael.org

Name of Applicant:	
Street Address:	
City, State & Zip Code:	
Phone:	Date of Birth:
School Attending:	<u> </u>
Synagogue Affiliation:	
Father's (or Legal Guardian's) Name:_	
Occupation:	Employer:
Business Address:	
Business Phone:	Email:
Owner _	PartnerEmployee
Mother's (or Legal Guardian's) Name:	

Business Address: Business Phone: Email:	Occupation:			Emp	loyer:		
OwnerPartnerEmployee Marital Status of Parents: Family Information Please include MTVA applicant information Name Of Child	Business Addres	ss:					
Marital Status of Parents: Family Information Please include MTVA applicant information Name Of Child Age School Attending Tuition Subsidy Granted Have you applied to other sources for scholarship assistance? Yes No	Business Phone:			Ema	il:		
Family Information Please include MTVA applicant information Name Of Child Age School Attending Tuition Subsidy Granted Have you applied to other sources for scholarship assistance? Yes No		Own	erPa	artner _	Employee		
Please include MTVA applicant information Name Of Child Age School Attending Tuition Subsidy Granted Have you applied to other sources for scholarship assistance? Yes No	Marital Status o	Parents:					
Have you applied to other sources for scholarship assistance? Yes No	•		ormation				
Yes No	Name Of Child	Age	School A	attending	Tuition	Subsidy Gran	ıted
Yes No							
Yes No							
Yes No							
Yes No							
	Have you applie	d to other sources f	or scholarsh	nip assistan	ce?		
Name Of Source Date Applied Subsidy requested Response	-	Yes			No		
	Name Of Source	Date App	blied	Subsi	dy requested	Response	

Tax Return Information

2020	2021	2022 (If Available)

Income:

If parents are divorced, or separated, what amount of court ordered support is being received for the student?
Has the applicant been to Israel before?
If yes, in what capacity? (Family visit, organized touring program)

Assets

Real Estate	
Do you rent your apartment?	
Monthly rent:	
Do you own a home, condominium or co-op?	
Current market value:	
Unpaid mortgage:	
Monthly carrying charge:	
Purchase price and year:	
List any extenuating circumstances.	
The undersigned is applying for a financial subsidy in the amount of \$ coming year.	for this
THE INFORMATION GIVEN IN THIS APPLICATION IS FOR APPLYING TO MIDRESHET AND YESHIVAT TORAH V'AVODAH SUBSIDY. I THE UNDERSIGNED STATE THAT ALL STATEMEN ARE TRUE. FALSE OR MISLEADING STATEMENTS WILL CAUSE TO BE REJECTED AND NO FURTHER CONSIDERATION WILL BE	FOR A FINANCIAL NTS MADE HEREIN THIS APPLICATION
Father's (Or Legal Guardian's) Signature:	_ Date:
Mother's (Or Legal Guardian's) Signature:	Date:
Applicant's Signature: Date:	Date:

PLEASE INCLUDE THE FOLLOWING COPIES: INCOME TAX FORMS 1040 AND W2 FOR EACH PARENT FOR 2020 , 2021, and 2022 (if available).