



7135 North Carpenter Road  
 Skokie, Illinois 60077  
 Phone: (847) 982-2500 Fax: (847) 674-6381  
[www.htc.edu](http://www.htc.edu)

## HTC DISCRETIONARY GRANT APPLICATION FORM

DATE: \_\_\_\_\_

### A. STUDENT INFORMATION:

Student Name \_\_\_\_\_ Touro ID # \_\_\_\_\_ SS#:XXX-XX-\_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Student Current Marital Status: ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

### B. PARENT EMPLOYMENT INFORMATION:

- Father's Occupation & Employer: \_\_\_\_\_
- Mother's Occupation & Employer: \_\_\_\_\_
- What is your combined adjusted gross income for the past filing year? \_\_\_\_\_
- Is parsonage offered by either employer? ☐ Yes ☐ No
- How much is your household total parsonage benefit? \$ \_\_\_\_\_

### C. FAMILY INFORMATION:

- Total number of people residing in your household: \_\_\_\_\_
- Do you own or rent your home? ☐ Own ☐ Rent
- Monthly rent/mortgage \$ \_\_\_\_\_ Assessment \$ \_\_\_\_\_
- If you pay real estate taxes separately how much do you pay yearly? \$ \_\_\_\_\_
- What is the current value of the parents savings and investments? \$ \_\_\_\_\_
- What is the current value of the students savings and investments? \$ \_\_\_\_\_
- Do you have car payments? ☐ Yes ☐ No  
If so, how much is your monthly payment? \$ \_\_\_\_\_
- Do you own a home besides the one you reside in during the year? ☐ Yes ☐ No
- Are you the primary care giver of elderly parents/grandparents? ☐ Yes ☐ No
- Does the student or parents receive social security benefits? ☐ Yes ☐ No  
If so, how much? \$ \_\_\_\_\_
- Does the student or parents receive public assistance? ☐ Yes ☐ No  
If so, how much? \$ \_\_\_\_\_

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**D. ADDITIONAL FAMILY INFORMATION:**

- Please list each school, tuition paid after scholarship and names of children attending K-12.

SCHOOL	TUITION PAID AFTER SCHOLARSHIP	NAMES & AGES OF DEPENDENTS

- Please list each dependent that is post high school, which yeshiva/college/program they are attending and the tuition you are paying.

YESHIVA/COLLEGE/PROGRAM	TUITION PAID AFTER SCHOLARSHIP	NAMES & AGES OF DEPENDENTS

- If someone other than you is paying tuition obligations for any of your dependents, please list each school, dependent's name and amount.

SCHOOL	TUITION BEING PAID ON YOUR BEHALF	NAMES & AGES OF DEPENDENTS

- Please list any dependents that you are supporting in kollel and the amount you are providing each month.

NAMES & AGES OF DEPENDENTS	TOTAL PROVIDED BY YOU

**E.SPECIAL CIRCUMSTANCES:**

**Briefly describe any special circumstances you feel should be brought to the attention of the scholarship committee. If additional space is needed please attach another sheet of paper or use the back of this form.**

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, leaving small margins at the top and bottom. There are no vertical margin lines, text, or other markings on the page.

**ALL STUDENTS THAT ARE SUBMITTING A DISCRETIONARY GRANT APPLICATION MUST HAVE ALREADY SUBMITTED A FAFSA FOR THE SCHOOL YEAR THEY ARE REGISTERING FOR IN ORDER TO BE CONSIDERED.**

**Please submit the first two pages on your current tax return and your latest W-2 form.**

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I certify that the information in this application is accurate. I understand that the tuition committee reserves the right to verify all the information I have provided. I authorize the Office of Financial Aid to release information regarding my financial aid to the tuition committee.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

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**Please return this form to:**

**Hebrew Theological College  
Financial Aid Office  
7135 N. Carpenter Road  
Skokie, IL 60077**

**OR**

**Email: [mlondon@htc.touro.edu](mailto:mlondon@htc.touro.edu)**