



AHAVATH TORAH CONGREGATION

Application for Financial Assistance

PLEASE PRINT. This application is to be completed fully and signed, with required supporting documents attached. A personal interview may be requested before consideration of your application. The information in the application will be held in strict confidence. When complete, forward to the Financial Secretary.

For the fiscal year July 1, 2022 to June 30, 2023

Applicant Information:

Name: _____ Age: _____

Spouse: _____ Age: _____

Address: _____

Telephone: _____

E-Mail: _____

Marital status: _____

Occupation: (Self) _____ (Spouse) _____

Employed by: (Self) _____ (Spouse) _____

Dependents:

Name: _____ Age: _____ Hebrew school class: _____

Name: _____ Age: _____ Hebrew school class: _____

Name: _____ Age: _____ Hebrew school class: _____

Office use only:

Current year

Prior year

Dues	\$ _____	\$ _____
Capital Fund	\$ _____	\$ _____
Other	\$ _____	\$ _____
Total Charges	\$ _____	\$ _____
Prior year assistance	\$ _____	\$ _____
Current year assistance	\$ _____	\$ _____
Net after assistance	\$ _____	\$ _____
Monthly Payment	\$ _____	\$ _____



FINANCIAL INFORMATION:

Tax return information

Prior year actual

Current year

Wages	\$ _____	\$ _____
Interest & Dividends	\$ _____	\$ _____
Business Income	\$ _____	\$ _____
Other Income	\$ _____	\$ _____
Total Income	\$ _____	\$ _____
Mortgage interest, & taxes	\$ _____	\$ _____
Other deductions	\$ _____	\$ _____

Note: Attach page 1, 2 & schedule A from tax return if information above not completed.

Other income and expenses

Prior year actual

Projected year

Monthly rent payment	\$ _____	\$ _____
College tuition after aid	\$ _____	\$ _____
Medical expenses after Reimbursement	\$ _____	\$ _____
Monthly auto loan or lease	\$ _____	\$ _____
Alimony	\$ _____	\$ _____
Childcare	\$ _____	\$ _____
Other expenses	\$ _____	\$ _____
Alimony/ childcare received	\$ _____	\$ _____
Additional Income	\$ _____	\$ _____

Assets and Liabilities

Cash / Savings / Investments	\$ _____
Home value	\$ _____
Other real estate value	\$ _____
Retirement plans	\$ _____
Other major asset value	\$ _____
Other major liabilities	\$ _____

Monthly mortgage(s) \$ _____

Monthly mortgage(s) \$ _____



Application for Financial Assistance

Based on the information I/we have provided to Ahavath Torah Congregation in this application, I/we feel that we should be considered for financial assistance because of the following:

I/we feel that I/we could reasonably pay the following amounts towards our Temple Obligations.

I/we could reasonably pay this amount _____ A

Months (12) _____ B

I/we could reasonably pay this amount *annually* _____ A x B

Required by all applicants

In exchange for financial assistance, I/we are willing to volunteer our time to support:

Bingo _____

The general facility or kitchen assistance during functions and holidays _____

The Fundraising Team and participate with fundraising projects _____

The numerous Teams providing at ATC _____

I/We declare that to the best of our knowledge the information provided in this application is accurate and complete. I/We will acknowledge the assistance offered by ATC and will provide monthly payment as agreed,

Applicant Signature	Date	Spouse Signature	Date
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