

FINANCIAL AID APPLICATION

PARENT(S) NAME

PHONE #

NAME OF IEIT SCHOOL

STATEMENT OF PRINCIPLES FOR GRANTING OF FINANCIAL AID

- The maximum amount of tuition assistance that a student is eligible to receive is up to 60 percent.
- Financial aid shall be granted only after the need for such assistance has been carefully examined by the school. Every applicant shall be asked to furnish reasonable detailed information concerning their requirements by filling out this application form and furnishing the requested documents. This shall be supplemented by written comments and personal interviews.
- Applications for financial aid shall be determined within 4 weeks of receiving the application form and supporting documentation.

Please provide the following documentation.

1. Detailed copies of all pages and Schedules of last year's Federal Income Tax Return Form 1040, 1040A or 1040EZ, 1040E, W2 & 1120S.
2. Copies of all current W-2 Wage and Tax Statement Forms.
3. Copies of last two (suggest 3) months' pay stubs for both parents/ guardians
4. Copies of Parents' Photo ID and Social Security Card
5. Last 6 months' bank statements- checking and savings accounts
6. Rent receipt or lease
7. Any other pertinent bills, eviction notices, proof of government aid, etc. as proof of financial hardship
8. Name, Address and Phone number of THREE references
9. An update of all information/ documents will be required, either if the financial situation of the parent/guardian changes materially or prior to the beginning of the following Schoolyear.

This application form must be filled out in its entirety, signed, and dated by the Parent(s) or Guardian(s) listed in Sections A and B. The information supplied by the applicant will be considered strictly confidential. It will not be made available to any individual or group not directly concerned with the granting of Financial Aid. Please answer ALL questions on this application form. Please include last names in all name sections and include city and state in all address sections. Please enter N/A (not applicable) if something does not apply to you and your family. Failure to complete all questions will delay its processing and may reduce your opportunity for assistance.

SECTION A – STUDENT INFORMATION

1. ENROLLMENT New Application Subsequent Application

2. HOME ADDRESS

<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip</i>

3. STUDENT INFORMATION

Student Name	Date of Birth	GRADE
	././ /	
	././ /	
	././ /	
	././ /	

4. STUDENT(S) LIVE WITH Mother Father Both Parents OTHER Specify_____

SECTION B – ESTIMATED RESOURCES

1. List the amounts for each of the following income sources:

From parent(s) income / resources	\$	
Current Cash Value, Checking, Savings	\$	
Child support & Alimony	\$	
Investment Value (401K, IRA, Stocks, Bonds)	\$	
Social Security / SSI / Disability	\$	
Other. Specify _____	\$	
TOTAL	\$	

2. Parent Information

Parent/ Guardian #1	Parent/ Guardian #2
Name:	Name:
Marital Status:	Marital Status:
Occupation:	Occupation:
Employer:	Employer:

3. Dependent(s)

Dependent	Date of Birth
	____/____/____
	____/____/____
	____/____/____
	____/____/____
	____/____/____
	____/____/____

4. Unusual Circumstances (*Check all that apply to your situation*)

- | | |
|---|--|
| <input type="checkbox"/> Loss of Job | <input type="checkbox"/> Death in the family |
| <input type="checkbox"/> Recent separation / divorce | <input type="checkbox"/> Shared custody |
| <input type="checkbox"/> Change in family living status | <input type="checkbox"/> High debt |
| <input type="checkbox"/> Bankruptcy | <input type="checkbox"/> Child Support Reduction |
| <input type="checkbox"/> College expenses | <input type="checkbox"/> Medical / Dental expenses |
| <input type="checkbox"/> Income Reduction | <input type="checkbox"/> Stared tuition |
| <input type="checkbox"/> Illness or Injury | <input type="checkbox"/> Other: Specify: |

5. Residence

Owned

Rented

Monthly Payment

\$

Year Purchased

Other Real Estate Investments

\$

SECTION C – PERSONAL STATEMENT (OPTIONAL)

A personal statement aids in the understanding of your situation and why your family should be considered for assistance from the limited funds available. In some cases, expenses of a non-discretionary nature (due to illness, unemployment, or other unforeseen expenses), may be included in our analysis. If your family has such special circumstances, outline below in the space provided below

SECTION D – STATEMENT OF CERTIFICATION AND UNDERSTANDING

1. Please provide a copy of pages 1 & 2 of your last years’ 1040 Federal Income Tax Returns.
2. Submit the school registration fee with your financial aid application. The registration fee is refundable if (1) no scholarship funds are available or (2) the applicant is determined to be ineligible for assistance through this program. The registration fee is not refundable if the applicant is approved for scholarship funds but chooses not to enroll.
3. Submit the signed “Non-Disclosure and Confidentiality Agreement” stating that your scholarship award is confidential, and any breach of confidentiality may result in rescinding of the tuition assistance.

I/WE understand that all information provided may also be submitted to the Islamic Education Institute of Texas, the parent organization of the School (“IEIT”) Financial Aid Program for approval, and I acknowledge that all information provided in this application is accurate and that there are no material omissions that would impact the overall financial picture.

I/WE understand that providing information to the contrary will prohibit this application from consideration. I/WE further understand that in order to receive an official award, we must be admitted to the IEIT campus, and submit all required financial aid application documents as outlined. In addition, I/WE understand that any notification received from IEIT based on this information is an estimate only and is subject to change if my/our subsequent financial information differs.

Signature of Parent/Guardian 1

Date

Signature of Parent/Guardian 2

Date