



228 West Market Street, Newark, New Jersey 07103-2715  
(973) 622-1613 fax (973) 622-1128 www.svanj.org

**THIS FORM MUST BE COMPLETED BY THE PARENTS OR GUARDIANS OF THE STUDENT**

Student's Name: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Guardian's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
(# Street) (City/Town) (Zip Code)

Student lives with (please check appropriate box): ☐ Mother ☐ Father ☐ Guardian

Phone Contact # (including area code): \_\_\_\_\_

Number of Children in the family living at home: \_\_\_\_\_

For each of the above, please list the following:

**Name:** **Age:** **School Now Attending:**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**(A) Parents' Annual Income – Please enter yearly amounts:**

	2019	2020
<b>1. <u>TAXABLE INCOME BEFORE DEDUCTIONS:</u></b>		
a. Wages, salaries, etc. –father, stepfather, or male guardian	\$ _____	\$ _____
b. Wages, salaries, etc. – mother, stepmother, or female guardian	\$ _____	\$ _____

**(B)**

<b>2. <u>NON-TAXABLE INCOME:</u></b>		
a. Social Security Benefits	\$ _____	\$ _____
b. Welfare, child support, disability	\$ _____	\$ _____
c. Unemployment	\$ _____	\$ _____
d. Other income: (please list type and amount)	\$ _____	\$ _____

\_\_\_\_\_

**(C) Parents' or Guardians' Assets and Indebtedness**

1. Do you own your own home? ☐ Yes ☐ No

Year Purchased: \_\_\_\_\_ Purchase Price: \$ \_\_\_\_\_

Present Market Value: \$ \_\_\_\_\_ Unpaid Mortgage: \$ \_\_\_\_\_

2. Do you own other real estate? ☐ Yes ☐ No

3. Total value of other investments, savings: \$ \_\_\_\_\_

4. Do you have significant outstanding debts? ☐ Yes ☐ No

If yes, please list below the nature and amount of each:

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**(D) Need for Financial Assistance for High School Tuition**

Please use this space to explain any circumstances which may further support your need for financial aid:

**(E)\*\* You must attach a 2020 IRS Income Tax Return Transcript AND your W-2 form(s) or letter providing proof of income from unemployment, disability, child support, public assistance, or Social Security.\*\***

(Please visit <https://www.irs.gov/individuals/get-transcript> to request Income Tax Return Transcript)

I, (WE), DECLARE THAT THE INFORMATION REPORTED HERE IS TRUE, CORRECT,  
AND COMPLETE.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Print Name Here

**Application must be completed and returned by December 6, 2021.**