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Financial Aid Application 2017-2018 School Year

Application Deadlines:

Currently enrolled students: 6/30/17*
 Newly enrolled students: 9/18/17*

For Office Use Only

Application date _____
 Registration fee paid
 Date _____
 ID _____
 FA Rate _____

Financial Aid

A need-based annual financial aid program is offered to families who might otherwise be unable to afford the tuition. Applications are available from the office. A major part of this financial aid comes from Zakat Account of Masjid Darul Qur'an. Adjusted financial-aid tuition rates are valid for **ONE SCHOOL YEAR ONLY**.

Criteria

1. Applicant families must fill out all paperwork and submit to school administration before the deadline. Families applying for more than one child need only fill out **one** packet.
2. Financial aid reduction in tuition is determined by an assessment of a family's financial need. Financial need is defined as the difference between the family's resources and the student's total educational expenses.
3. Decisions on awards are made by the Financial Aid Committee after a review of the Parents' Financial Statement as evaluated by the School and Student Service for Financial Aid and a review of income tax returns. Families are required to reapply each year for continued support. Financial aid awards are not guaranteed. A financial aid grant to one student does not guarantee financial aid to a sibling who may also apply. Funds are limited and MDQ Academy cannot meet all requests for aid even though need may have been demonstrated.
4. Admission decisions are made independent of financial aid decisions. Financial aid distribution is reviewed each year. If financial need continues and if academic and behavior performance are satisfactory, the aid generally is continued throughout the students' education at MDQ Academy.
5. All materials associated with the financial aid application process must be completed according to established deadlines.
6. Parents **should and are required to help** in school activities and volunteer. Please use the space on page 4 to describe how you can contribute. We understand that Parents/Guardians may not be able to help financially, but they can raise their standards of giving back however they can. Please note that it is **REQUIRED** to volunteer if you are receiving Financial Aid. Thank you.
7. Parents should help in fundraising to eliminate some burden from the school. Please use the space on page 4 to describe how much you think you can help our school with fundraising throughout the year.

Parents are assured that all information submitted will be kept in strictest confidence.

Checklist of Documents Needed

You will need records of income earned in the year prior to when you will start school (i.e. for the 2012-2013 school year, you will need financial information for 2011), referring to:

- Child's Social Security Number (can be found on Social Security card)
- Father/Mother driver's license (if any) or any state or Federal issued identity card such as passport
- Parents W-2 Forms and other records of money earned
- Federal Income Tax Return
 - IRS Form 1040, 1040A, 1040EZ, 1099, ...
- Your untaxed income records
 - Social Security
 - Temporary Assistance to Needy Families
 - Welfare, or
 - Veteran's benefits records
 - Rental income
- Your current bank statements (dating back to one year)
- Your current business and investment mortgage information, business and farm records, stock, bond, and other investment records
- If you received financial aid previous school year, include a letter of volunteer service from school administration.

*please do not wait for deadlines - apply as soon as possible as funds are limited.

Students and Siblings Information

MDQ Academy student and all immediate-family siblings who reside within the same household and are supported by the signee(s):

	Last Name	First Name & MI	School	Grade	DOB (mm/dd/yy)	Age	Last 4 digits of Social Security No.	Gender	Relationship to Signee
1								M <input type="checkbox"/> F <input type="checkbox"/>	
2								M <input type="checkbox"/> F <input type="checkbox"/>	
3								M <input type="checkbox"/> F <input type="checkbox"/>	
4								M <input type="checkbox"/> F <input type="checkbox"/>	
5								M <input type="checkbox"/> F <input type="checkbox"/>	
6								M <input type="checkbox"/> F <input type="checkbox"/>	

Please put information on any additional siblings on clearly marked and labeled separate paper and attach to the application if needed.

Parents/Guardians Information

Home address to which all correspondence will be mailed:

Number, Street, Apartment			City		State	Zip Code

	Full Name	Age	Profession/Title	Employer	Years with firm	Schedule
1						<input type="checkbox"/> Part time <input type="checkbox"/> Full time

List skills/interests relevant to volunteering at school:

Occupation or Home-based work:

Highest degree or level of school completed/major/other educational qualifications:

2						<input type="checkbox"/> Part time <input type="checkbox"/> Full time
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List skills/interests relevant to volunteering at school:

Occupation or Home-based work:

Highest degree or level of school completed/major/other educational qualifications:

Parents' Income and Expense Information

Basic tax Information	<p>The information on this form is tax return from 20__ : <input type="checkbox"/> Completed <input type="checkbox"/> Estimated</p> <p>Income tax filing status for:</p> <p>(20__) <input type="checkbox"/> 1. Single <input type="checkbox"/> 2. Married, joint return <input type="checkbox"/> 3. Married, filing separately <input type="checkbox"/> 4. Head of household</p> <p><input type="checkbox"/> 5. Did not file</p> <p>(20__) <input type="checkbox"/> 1. Single <input type="checkbox"/> 2. Married, joint return <input type="checkbox"/> 3. Married, filing separately <input type="checkbox"/> 4. Head of household</p> <p><input type="checkbox"/> 5. Did not file</p> <p>How many federal income tax exemptions did you or will you claim for 20__? _____</p> <p>How many children, including the student applicants(s), are residing in your home and/or are receiving support from you in 20__-20__? _____</p>
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		20__	Estimated 20__
Total taxable Income before deductions	Salaries and wages for parent, stepparent, or guardian A	\$	\$
	Salaries and wages for parent, stepparent, or guardian B	\$	\$
	Taxable dividends and/or interest income from 1099 statement(s)	\$	\$
	Alimony received or estimated (do not include child support)	\$	\$
	Net profit/loss from business and/or farm (if loss use parenthesis around figures).	\$	\$
	Check only one box. <input type="checkbox"/> 1. Parent or guardian A <input type="checkbox"/> 2. Parent or guardian B <input type="checkbox"/> 3. Both	\$	\$
	Other taxable income	\$	\$
	Untaxed portion of payments to IRA	\$	\$
	Keogh plan payments and self-employed SEP deduction	\$	\$
	Other IRS Allowable adjustments to taxable income	\$	\$

Total nontaxable income	Child support received for all children	\$	\$
	Social Security benefits for entire family	\$	\$
	IRS total itemized deductions from IRS schedule A	\$	\$
	Total federal tax paid (IRS 1040 or 1040A)	\$	\$
	Self-employment tax paid	\$	\$

How much can you afford for educational expenses for the 20__ - 20__ academic year for each student applicant? <i>Do not leave blank.</i>	Student A	Student B	Student C	Student D
	\$ _____	\$ _____	\$ _____	\$ _____

I had a discounted rate during 2016-2017 school year Yes No If yes, rate _____ application# _____

I or my representatives volunteered for _____ hours and raised \$ _____ in donations on _____ (date).

Use this space to provide any additional comments. Be as brief as possible.

Parents' Certification and Authorization

We declare that the information reported on this form, to the best of our knowledge and belief, is true, correct, and complete. MDQ Academy has our permission to verify the information reported. If asked by the school, we agree to send an official copy of our latest income tax return and/or a signed IRS Form 4506 directly to the school or organization. A signed IRS Form 4506 will allow the school to request a copy of our federal tax return directly from the IRS.

Parent A	Signature _____ Home telephone _____ Work telephone _____ Date _____
Parent B	Signature _____ Home telephone _____ Work telephone _____ Date _____

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Rate & FA# confirmed Yes No
Volunteer hours confirmed Yes No
Donation amount confirmed Yes No

Comments:

Review Results and Comments:

Approved By: _____ Date: _____

Approved By: _____ Date: _____