The Sinai Academy

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2020 Application for Financial Assistance

Application procedure:

1. Application form to be lodged with the Treasurer for the Sinai Academy processing before submission to the Sinai Academy Remission Board for consideration.
2. No application will be considered without full disclosure as required and receipt of all supporting documentation as set out herein.
3. In due course a formal letter will be issued confirming whether your application has been has been approved and the extent thereof.

In the event you require assistance with the completion of these forms, kindly contact the Treasurer personally.

PARENTS' DETAILS						
	FATHER/GUARDIAN			MOTHER/GUARDIAN		
SURNAME						
FORENAMES						
IDENTITY NUMBER						
HOME ADDRESS						
POSTAL CODE						
CELLPHONE NOS						
HOME TELEPHONE						
BUSINESS NAME						
BUSINESS TELEPHONE						
EMAIL ADDRESSES						
OCCUPATION						
DATE OF BIRTH						
PRESENT MARITAL STATUS MARK WITH AN X	SINGLE	MARRIED	WIDOWED	SINGLE	MARRIED	WIDOWED
	DIVORCED	SEPARATED		DIVORCED	SEPARATED	
PUPIL'S GRANDPARENTS	MR			MR		
	MRS			MRS		

FINANCIAL ASSISTANCE REQUESTED FOR THE FOLLOWING PUPILS							
	CHILDREN	AGE	SCHOOL	GRADE	YEAR	MONTHLY FEE R	WE CAN AFFORD R
1							
2							
3							
	TOTAL						

OTHER DEPENDENTS – CHILDREN NOT AT THE SINAI ACADEMY

	CHILDREN	AGE	SCHOOL/COLLEGE/UNIVERSITY	GRADE/YEAR	MONTHLY FEE R
1					
2					
3					

GENERAL INFORMATION

1. The school considers both parents to be responsible for fees and only considers assistance if complete financial information of both parents is furnished, irrespective of the marital status and/or other agreements to which the school is not party to.

2. Both parents are expected to deal openly and honestly with the Remissions Board (represented by the Financial Manager).

3. Parents requiring assistance will be treated with dignity and respect and in the utmost confidence.

4. Remissions of fees granted are considered to be temporary educational loans.

5. Parents and pupils benefiting from the Phyllis Jowell Jewish Day School education are honour bound to repay the such loans granted if and when they are in a financial position to do so.

6. Parents sometimes experience severe cash flow problems. In these cases indulgence may be granted for payment over a specific period of time. It is expected that all other avenues for finance or assistance be fully exhausted before the school is requested to assist.

QUESTIONNAIRE

1.	DO YOU RECEIVE OR EXPECT FINANCIAL ASSISTANCE FROM FAMILY/ALTERNATE SOURCES SUCH AS INHERITANCE/TRUSTS/DONATIONS/PENSION PAYOUT/MATURATION OR PAYOUT OF POLICIES DURING THIS OR THE PRIOR CALENDAR YEAR ?	Y / N
2.	ARE BOTH SPOUSES/PARENTS IN EMPLOYMENT (ie WORKING) ? If NO, please give reasons.	Y / N
3.	HAVE YOU CONSIDERED RESTRUCTURING YOUR ASSET BASE SUCH AS SELLING SURPLUS ASSETS, INCREASING (OR RAISING) A BOND, IN ORDER TO FINANCE SCHOOL FEES ? If NO, please explain why.	Y / N
4.	CAN YOU OBTAIN FINANCE FROM ANY OTHER SOURCE eg BANK, BUSINESS, INSURANCE POLICIES ?	Y / N
5.	HAVE YOU APPROACHED THE TRUSTEES OF ANY TRUST THAT YOU OR YOUR CHILDREN ARE BENEFICIARIES OF TO APPLY FOR FUNDS TO BE MADE AVAILABLE FOR PRIMARY AND SECONDARY EDUCATION?	Y / N
6.	HAVE YOU APPROACHED YOUR PARENTS, GRANDPARENTS OR EXTENDED FAMILY FOR FINANCIAL ASSISTANCE TO PAY SCHOOL FEES ? If NO, please explain why.	Y / N
7.	DO YOU SHARE LIVING/HOUSEHOLD EXPENSES?	Y / N
8.	ARE YOU ABLE TO CONFIRM THAT ALL REMISSION OF FEES WILL BE REPAID TO THE SCHOOL AT A LATER DATE ?	Y / N
9.	DID YOU MAKE OR ARE YOU ANTICIPATING MAKING ANY MAJOR PURCHASES OR SALES OF OVER R10 000 THIS YEAR ? eg NEW VEHICLE / HOME IMPROVEMENTS / NEW HOME / PURCHASE OF BUSINESS /SIMCHAS / MEDICAL EXPENSES, ETC.	Y / N

If YES to any of the above questions, please provide full details of the outcome and effect.

NO APPLICATION WILL BE ASSESSED WITHOUT THE FOLLOWING DOCUMENTATION:

1.	THE LATEST MONTHLY SALARY ADVICE ("payslip") BOTH FOR YOURSELF & YOUR SPOUSE.	Y / N
2.	FULL DETAILS OF ANY SALARY SACRIFICE BENEFITS.	Y / N
3.	IN THE EVENT YOU EARN COMMISSION (OR YOUR INCOME FLUCTUATES BY MORE THAN 15% IN ANY MONTH), PLEASE SUBMIT A SCHEDULE OF ALL GROSS AND NETT EARNINGS FOR THE PREVIOUS 12-MONTH CALENDAR YEAR, PRIOR TO THIS APPLICATION, SIGNED BY THE FINANCIAL OR ACCOUNTING OFFICER / ACCOUNTANT / AUDITOR / CERTIFIED BOOK-KEEPER (WHICHEVER IS APPLICABLE).	Y / N
4.	IF INFORMALLY EMPLOYED OR OPERATING AN INFORMAL BUSINESS, EVEN ON AN AD HOC BASIS, PLEASE ENCLOSE TRADING DETAILS AND INCOME EARNED OVER THE LAST 12 MONTHS.	Y / N
5.	SUBMIT A COPY OF YOUR AND YOUR SPOUSE'S LAST INCOME TAX RETURN FORM IT12) AND TAX ASSESSMENT (FORM IT34).	Y / N
6.	IF SELF-EMPLOYED / SHAREHOLDER OF A PRIVATE COMPANY/CLOSE CORPORATION, A COPY OF THE LATEST AUDITED FINANCIAL STATEMENTS MUST BE SUPPLIED.	Y / N
7.	IF YOU OR YOUR CHILDREN HAVE A BENEFICIAL INTEREST IN A TRUST, THE TRUST DEED AND THE LATEST FINANCIAL STATEMENTS NEED BE FURNISHED.	Y / N
8.	IF YOU OWN PROPERTY AND IT IS MORTGATED, A COPY OF A CURRENT BOND STATEMENT NEED BE FURNISHED.	Y / N
9.	STATEMENT OF: LISTED SHARES IN PRIVATE COMPANIES / OTHER PROPERTIES / TIME SHARE / HPs /SURRENDER VALUES OF ENDOWMENT AND LIFE POLICIES.	Y / N
10.	IF AN INHERITANCE HAS BEEN RECEIVED, FULL SUPPORTING DOCUMENTATION NEED BE SUPPLIED	Y / N
11.	COPY MOST RECENT REMISSION AWARD LETTER FROM YOUR CHILD'S PRIOR SCHOOL (or equivalent notification).	Y / N

.

ADDITIONAL INFORMATION:

(supply hereunder any additional relevant information)

……

……..

……..

……..

……

……..

MONTHLY INCOME

INCOME		SELF	SPOUSE	
	NAME OF EMPLOYER			>>>>>>
	WHAT POSITION DO YOU HOLD?			>>>>>>
	MAKE/YEAR/MODEL (COMPANY VEHICLE)			>>>>>>
		>>>>>>	>>>>>>	**TOTALS**
	GROSS MONTHLY SALARY (DRAWINGS)			
	TRAVELLING ALLOWANCE			
	ALLOWANCES (SPECIFY)			
	BENEFITS & EXPENSES PAID BY THE COMPANY (SPECIFY)			
	GROSS REMUNERATION			
SALARY DEDUCTIONS	PAYE/PROVISIONAL TAX/SITE	R	R	R
	MEDICAL AID			
	PENSION OR PROVIDENT FUND			
	OTHER (SPECIFY)			
	TOTAL DEDUCTIONS	R	R	R
OTHER MONTHLY INCOME	ANNUAL BONUS (OR INCENTIVE BONUSES)			
	MAINTENANCE/WELFARE			
	DIVIDENDS & INTEREST			
	RENT RECEIVED			
	OTHER INCOME (SPECIFY)			
	OTHER CASUAL EMPLOYMENT			
	TOTAL OTHER INCOME	R	R	R
	TOTAL MONTHLY INCOME	R	R	R
	TOTAL/GROSS INCOME	>>>>>>	>>>>>>	R

MONTHLY EXPENDITURE

HOUSE	RENT/BOND	R	***INSURANCE***	LIFE & ENDOWMENT	R
	LEVY/RATES	R		RETIREMENT ANNUITY	R
	WATER/ELECTRICITY	R		HOUSEHOLDERS	R
	TELEPHONE	R	***VEHICLES***	PETROL	R
	CELL PHONE/S	R		REPAIRS	R
HOUSEKEEPING	GROCERIES	R		HP	R
	CLOTHING	R	***ENTERTAINMENT***	M NET/SATELLITE	R
	DOMESTIC WAGES	R		GIFTS	R
OTHER EXPENSES	BUS FARES	R	COMMUNAL FEES/ DONATIONS	HOLIDAYS	R
	FEES (excl PJJDS)	R		SPORT	R
	EXTRA MURALS			POCKET MONEY	
LOAN REPAYMENTS		R	***MAINTENANCE***	EX-SPOUSE	R
				ELDERLY PARENTS	R
NET SURPLUS / (DEFICIT)		**R**	***TOTAL EXPENDITURE***		**R**

STATEMENT OF ASSETS & LIABILITIES

SUBURB	STAND/PLOT	FIXED PROPERTY TYPE OF DWELLING	REG OWNER DATE OF TRANSFER	RAND ONLY PRICE PAID	RAND ONLY MARKET VALUE
				R	R
				R	R

OTHER MOVABLE ASSETS eg Vehicles/Furniture	
	R
	R
	R

INVESTMENTS/SHARES ETC IN QUOTED/PRIVATE INSTITUTIONS		
TYPE OF INVESTMENT/SHARE	WHERE HELD	R
		R
		R
		R

BANK BALANCES		
TYPE (SAVINGS, FIXED DEPOSITS, CURRENT ACC)	NAME OF FINANCIAL INSTITUTION	
		R
		R

LIFE/RETIREMENT POLICIES				*Surrender Values*
NAME OF ASSURANCE COMPANY	COVER (LIFE / ENDOWMENT)	***AMOUNT OF COVER***	***MATURITY DATE***	**R**
		R		**R**
		R		**R**
		R		**R**
		TOTAL ASSETS		*** R**

BOND				
SUBURB	STAND NUMBER	BOND HOLDER/SELLER	MONTHLY REPAYMENTS	*OUTSTANDING BALANCE*
			R	R
			R	R
			R	R

INSTALMENT SALES (HPs)/LEASES				
NAME OF FINANCE COMPANY	TYPE OF ASSET	MONTHLY REPAYMENTS	FINAL REPAYMENT DATE	OUTSTANDING BALANCE
		R		R
		R		R

OVERDRAFT/LOANS/CREDIT CARD ACCOUNTS				
TYPE OF FACILITY (E.G. PERSONAL LOAN / OVERDRAFT) TYPE ASSET	REPAYMENT DATE	MONTHLY	FINAL REPAYMENTS	OUTSTANDING BALANCE
				R
				R
				R

ACCOUNTS PAYABLE (SPECIFY)	
	R
	R

CONTINGENT LIABILITIES 9E.G. GUARANTEES / SURETYSHIPS / NOTARIAL BONDS)				*OUTSTANDING BALANCE*
				R
				R
		TOTAL LIABILITIES		***R**
		NET ASSETS / LIABILITIES		***R**

DECLARATION BY PARENTS

1. I/We the undersigned,

……
(full name of Father), and

……
(full name of the Mother)

being the legal guardian/s of the children enrolled do hereby make application for Financial Assistance to the Remissions Board of The Sinai Academy ("TSA")for school fees and other charges.

2. I/We hereby declare that the financial information relating to myself and my spouse (or other parent if applicable) is truly and correctly disclosed in this application and that no information relevant to this application has been omitted.

3. I/We hereby accept without reservation the following conditions regarding this application:

3.1 The Financial Assistance assessment is applicable only to the current school year or such shorter period as may be decided upon. A fresh updated application must be submitted for any application for each calendar school year.
3.2 The TSA reserves the right to amend or withdraw any financial assistance granted, and to recover any assistance previously granted in the event any information submitted be found to be false, misleading or incomplete.
3.3 I/We hereby authorise the SA to process payments by way of a monthly debit order.

4. I/We hereby authorise any referee nominated by me/us to disclose to the Treasurer all such information (including documentary evidence) as is (in the opinion of the Remission Board) reasonably necessary to evaluate this application.

5. I/We hereby authorise the TSA to make any information appertaining to this application available to the Chairman of the bursary committee of the SA Jewish Board of Deputies (Cape Council).

6. I/We hereby acknowledge myself/ourselves to be jointly and severally liable to the TSA and all associated bodies controlled or administered by the TSA for all school fees and incidental charges as may be determined.

7. I/We consent to the PJJDS or their appointed agent drawing my/our credit record from any registered credit bureau.

7. I/We the undersigned, hereby acknowledge that in the event we be granted any Remission of school fees, such Remission is hereby acknowledged to be a Temporary Educational Loan of school fees from the TSA. We undertake, **as a moral obligation**, to Bli Neder repay the School for such Temporary Educational Loan, if and when we are able, even if this is after our own child/children have graduated from the School We will thereby be of assistance to others who may need similar assistance.

I/We hereby certify that all information supplied in this Application comprising 6 pages is true and correct in all respects and that I/we agree to be bound by all terms and conditions as set out herein.
We have not withheld any material information and I/we accept that this Application and the above Declaration shall be the basis of an agreement between The Sinai Academy and myself/ourselves:

FATHER'S SIGNATURE: …… *DATE* ……... *Signature Witnessed by:* *COMMISSIONER OF OATHS:* ……..	*MOTHER'S SIGNATURE:* …….. *DATE* ……... *Signature Witnessed by:* *COMMISSIONER OF OATHS:* ……..