

Academic Excellence in an Islamic Environment • Estd. 1991

## **CONFIDENTIAL**

## 2022-23 Application for Financial Hardship Discount (FHD)

| <u>Parents</u>                                   |              |                           |                 |                           |                   |                            |
|--|--------------|---------------------------|-----------------|---------------------------|-------------------|----------------------------|
| Father:  |              |                           |                 |                           |                   | -                          |
| Occupation:                                      | Employ       | /er:                      |                 |                           |                   |                            |
| Mother:  |              |                           |                 |                           |                   |                            |
| Occupation:                                      | Employ       | /er:                      |                 |                           |                   |                            |
| (Provide Guardian information if applied         | cable in pla | ace of parents            | s)              |                           |                   |                            |
| Address:   |              |                           |                 |                           |                   | Day                        |
| Phone:   | Even         | ing Phone: _              |                 |                           |                   |                            |
| Cell Phone:                                      |              | -                         |                 |                           |                   |                            |
| E-Mail Address:                                  |              |                           |                 |                           |                   |                            |
|  |              |                           |                 |                           |                   |                            |
| Number of Family Members: Adults                 | Chi          | ldren:                    | _               |                           |                   |                            |
| Number of children in college:                   | _ Number     | l                         | narried/not liv | ving with paren           | its:              |                            |
| CPSA Student Full Name                           | Gender       | Grade<br>Level<br>2022-23 | GPA<br>2021-22  | Calculated<br>Tuition Fee | Discount<br>Given | Tuition<br>Fee<br>Assigned |
|  |              |                           |                 |                           |                   |                            |
|  |              |                           |                 |                           |                   |                            |
|  |              |                           |                 |                           |                   |                            |
|  |              |                           |                 |                           |                   |                            |
|  |              |                           |                 |                           |                   |                            |
|  |              |                           | CIPS 4 OX       |                           |                   |                            |
| List student's names in order of higher to lower |              |                           |                 | •                         | _                 |                            |
| Note to Parents – All students are               |              |                           |                 |                           | out the yea       | <u>r.</u>                  |
| Please circle one - Are you                      | eligible     | for Zaka                  | t: Yes or       | No                        |                   |                            |
| Combined Family Monthly Income for parents)      | 2021:        |                           | (must           | include last 4            | pay stubs of      | both the                   |
| Adjusted Gross Income from the parent            | ts most rec  | ent federal in            | come tax ret    | urn:                      |                   | If                         |
| filing separately, Adjusted Gross Incom          | ne from the  | e wife's most             | recent federa   | al tax return: _          |                   |                            |
| Do you own business? YES: N                      | IO:          | Submit copy               | of business     | tax return.               |                   |                            |
| Do you own any rental property: VES:             | No           | O: N                      | Monthly Inco    | me•                       |                   |                            |

| Other Monthly Inco    | me:                                   |                                       |     |
|-----------------------|---------------------------------------|---------------------------------------|-----|
| Child support receive | ed: \$ Social Secu                    | rity benefits that were not taxed: \$ |     |
| Tuition Support (Spo  | nsor) anticipated from friends/relat  | ives/employer: \$                     |     |
| Name/Phone Number     | r of Sponsor:                         |                                       |     |
| Unemployment Bene     | efits Payment: \$Ot                   | ther non-taxable income: \$           |     |
| Assets:               |                                       |                                       |     |
| Value of cash, saving | gs and checking accounts: \$          |                                       |     |
| Value of stocks, muti | ual funds and other investments: \$_  |                                       |     |
| Value of retirement p | olan assets: \$                       |                                       |     |
| If you own your hom   | e, what is the estimated market value | ue: \$                                |     |
| Average Monthly Ex    | xpenses:                              |                                       |     |
| Electricity: \$       | Heating/Cooking Gas: \$               | Groceries: \$                         |     |
| TTT                   | Rent/Mortgage:                        | Health Insurance: \$                  | Car |

|               |                             | Total Tuition Fees Paid: \$          |
|---------------|-----------------------------|--------------------------------------|
|               |                             | Number of children in CPSA = Grades: |
|               |                             |                                      |
| FHD Committee | Chairperson Signature/Date: |                                      |
|               |                             |                                      |
|               |                             |                                      |
|               |                             |                                      |
| FHD Committee | Member Signature/Date:      | 2022-23 Discounted Fees per month    |
|               |                             | \$                                   |
|               |                             | Ψ                                    |
|               |                             |                                      |

| FHD Cor  | mmittee Member Signature/Date:   | By Parents<br>\$       | From Zakat<br>\$      | By Sponsor<br>\$        |  |
|----------|--|------------------------|-----------------------|-------------------------|--|
| Paym     | nents: Auto Insurance: \$  |                        |                       |                         |  |
| Misc.    | (Specify):   |                        |                       |                         |  |
| You      | tional Information: may use a separate page to explain special cir CPSA, Alumni parents etc. that you feel mightance.                                |                        | _                     | _                       |  |
| CPSA     | ereby declare that all the information stated a<br>A reserves the right to rescind the full amount<br>should any of the information included in this | of any tuition assista | nce and demand ful    | l payment of all tuitio |  |
| Signa    | ntures:<br>Father:   |                        | Date:                 |                         |  |
|          | Mother:  |                        |                       |                         |  |
|          | out these documents, CPSA will not be able to ept secured and confidential. Below is the che   |                        | ation. All document   | s received by CPSA      |  |
| ×        | Towards are 1040 for 2021 from IDC of  | fina fau hath uauaut   | . au iaiat uatuun fau | inint filam             |  |
| ×        |  |                        |                       |                         |  |
| ×        | _ ·  |                        |                       |                         |  |
| ×        |  |                        |                       |                         |  |
| ×        | Quarterly tax payment if you have your ow  |                        |                       |                         |  |
| ×        | Current bill for the electricity   |                        |                       |                         |  |
| ×        | Current bill for the heating/cooking gas   |                        |                       |                         |  |
| ×        | Current bill for the water   |                        |                       |                         |  |
| ×        | Current rent/mortgage payment  |                        |                       |                         |  |
| ×        | Current Auto and Home Insurance  |                        |                       |                         |  |
| ×        | Current car(s) payment   |                        |                       |                         |  |
| ×        | Other income such as social security, child support, worker's compensation etc.  |                        |                       |                         |  |
| <b>x</b> |  |                        |                       |                         |  |
| ×        |  |                        |                       |                         |  |
| ×        | Additional information below or on a separ   | rate page              |                       |                         |  |