

PROFESSIONAL DISCOUNT PROGRAM APPLICATION

Please complete this form if you would like to apply for our Professional Partner Program. Families applying for this program may also apply for other forms of financial aid, but participation is limited to a single program. Applications for each program must be completed and submitted by January 15. Families will receive the greater of the two awards.

Student(s) Name(s):		Grade(s) :
communal leaders and their fami discount of \$30% per child, per y Program is not need based and d	th Day School community is enrillies. For this reason, we have cear to our valued professional loes not require a family to subtent must be employed full-time	s a full-time Jewish communal riched by the active engagement of our created a program that offers a tuition partners. This Professional Partner mit financial aid documents. To be e as Jewish professional. The discount
By signing below, we acknowled	ge this to be true.	
Professional Parent Name	Institution	Position
Parent 1 Signature Date	 Parent	2 Signature Date