



## YMCA OF MONTCLAIR

### SUMMER CAMP SCHOLARSHIP/FINANCIAL ASSISTANCE APPLICATION FORM

**DEADLINE for SUBMITTING APPLICATION: MAY 1, 2023**

This form is to request assistance for the following summer camp programs:

Camp Name	Age	Camp Location
New Adventures (NA)	3-6	Our Lady of the Lake Church, Verona
New Discoveries (ND)	4-9	Montclair Community Pre-K, Montclair
Camp At The Lake (CATL)	5-14	Outdoor Education Center, West Milford
Explorers (EX)	9-12	Union Baptist Church, Montclair
Youth All-Stars Basketball (YBA)	8-13	Our Lady of the Lake Church, Verona

#### IMPORTANT INFORMATION:

Completing this information does not register your child for camp. You must register online and submit a deposit for each session to reserve a space.

#### GENERAL INFORMATION:

Scholarships are available to assist families with limited financial resources who desire to send children to the YMCA of Montclair. Since the funding is limited, awards will be made based on the relative needs of the applicant. Please note families that have received assistance in the past or that are currently receiving assistance for another YMCA program, must reapply for summer camp funding each year.

The YMCA of Montclair provides camp scholarship assistance to families within the following service area towns: Montclair, Glen Ridge, Cedar Grove, Verona, Bloomfield, and Clifton. In addition, assistance is available to West Milford, Bloomingdale and Haskell families attending Camp at the Lake. Families located outside our YMCA service area should contact their local YMCA for scholarship assistance information in their area.

#### INSTRUCTIONS:

A copy of last year's 1040 Income Tax return, W-2 form, and two current pay stubs must be attached. The child for which you are requesting funds must be listed as a dependent on your income tax return. Proof of residency in one of the towns listed above must be provided. Incomplete forms will not be processed. Please provide copies of the above items as this paperwork will not be returned and will be shredded.

**Notification of camp scholarships** awarded will be sent by May 30 to those who submitted completed applications by May 1. All requirements stated below must be met to receive funding. If you have any questions, please contact Rob Casale at 973-415-6117.

Check Off Paperwork Attached:

- |  |  |
|--|--|
| <input type="checkbox"/> Completed Application   | <input type="checkbox"/> Signature and Date on Application |
| <input type="checkbox"/> Proof of Income Attached (pay stubs, unemployment, SSI, etc.) | <input type="checkbox"/> Proof of Residency Attached       |
| <input type="checkbox"/> Income Tax Attached (child's name must appear as dependent)   |  |
| <input type="checkbox"/> Written letter supporting request for assistance (optional)   |  |

RETURN ATTACHED FORMS TO: YMCA of Montclair, 25 Park Street, Montclair, NJ 07042  
Attention: Camp Scholarships

**YMCA OF MONTCLAIR**  
**SUMMER CAMP SCHOLARSHIP/FINANCIAL ASSISTANCE APPLICATION DEADLINE FOR SUBMITTING**  
**APPLICATION: May 1, 2023**

**Please Print Clearly and List Camper Names:**

#1 Child's Name:		Age:
#2 Child's Name		Age:
Parent's Name:		
Street Address:	Town:	Zip:
Cell Phone:	E-mail:	

Step 1: Scholarship is requested for (check only one):

\_\_\_\_\_ Child Care Purposes (Parent/Guardian working during camp hours) –OR–  
 \_\_\_\_\_ Summer Camp Experience

Step 2: If Summer Camp is needed for:

- Child Care Purposes – choose all sessions required below – only two different camp programs per child may be selected. If assistance is available, weekly co-pay will be the parent's responsibility.
- Summer Camp Experience - choose a maximum of two sessions below.

Step 3: Listed below are camp session dates and the camp names. Select the camp and check dates carefully as changes cannot be made once funding is awarded. No more than two different camps can be selected to receive funding.

**Choose your camp by placing the appropriate letters corresponding to the camp by the dates selected. Please check each camp for dates, as all camps do not operate each session.**

**(Completing this information does not register your child for camp. You must register online and submit a deposit for each session to reserve a space).**

•NA New Adventures •ND New Discoveries •CATL Camp at the Lake •EX Explorers •YBA Youth All-Stars Basketball

CODE		CODE	
Session 1	June 26 – June 30	Session 6	July 31 – August 4
2	July 3 – July 7	7	August 7 – August 11
3	July 10 – July 14	8	August 14 – August 18
4	July 17 – July 21	9	August 21 – August 25 CATL Only
5	July 24 – July 28	10	August 28 – September 1 CATL Only

The number of weeks awarded to each camper will be based on the amount of funds available and the total number of financial assistance requests received.

**What financial contribution do you feel you can make towards your child's camp expenses?**  
 \$ \_\_\_\_\_ per week.

**FAMILY BACKGROUND INFORMATION:**

<b>Parent/Guardian (1):</b>			
Street Address:	Town:	State:	Zip:
Home Phone:	Cell Phone:		
E-mail:			
Current Employment Status: <input type="checkbox"/> Unemployed <input type="checkbox"/> Part-time employed <input type="checkbox"/> Full-time-employed			
Place of Employment:			
Address:		Position:	

<b>Parent/Guardian (2):</b>			
Street Address:	Town:	State:	Zip:
Home Phone:	Cell Phone:		
E-mail:			
Current Employment Status: <input type="checkbox"/> Unemployed <input type="checkbox"/> Part-time employed <input type="checkbox"/> Full-time-employed			
Place of Employment:			
Address:		Position:	

**FINANCIAL INFORMATION:**

Total annual income last year from all sources: \$ \_\_\_\_\_

**A copy of last year's Income Tax return, W-2 form, two current pay stubs, unemployment or SSI stubs and proof of residency in one of the towns listed under general information must be attached. Incomplete forms will not be processed or considered for funding.**

Total annual income anticipated this year from all sources: \$ \_\_\_\_\_

Will you be receiving financial assistance from other sources for childcare such as NJ Cares for Kids, Programs for Parents, etc.?  Yes  No If yes, please list: \_\_\_\_\_

Does your child qualify for reduced or free lunch in school?  Yes  No

Please attach a copy of any Custody Agreements or Financial Arrangements (if applicable).

Applicant may include with this application, a written statement including reasons for wanting your child to attend our YMCA camp, explaining extenuating financial circumstances not included in this application, etc.

**For applications submitted by the May 1 deadline, families will be notified by May 30 as to the status of this application.**

I understand that incomplete applications will not be considered for financial assistance. I certify that the information provided on this application is complete and true.

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

\_\_\_\_\_  
Date

**RETURN ALL FORMS TO: YMCA of Montclair, 25 Park Street, Montclair, NJ 07042 (Attention: Camp Scholarship)**