



YMCA OF MONTCLAIR

SUMMER CAMP SCHOLARSHIP/FINANCIAL ASSISTANCE APPLICATION FORM

DEADLINE FOR SUBMITTING APPLICATION: May 1, 2021

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

Camp Name	Age	Camp Location
New Adventures (NA)	3-8	Geyer Family Branch
New Discoveries (ND)	4-10	Montclair Community Pre-K
Camp At The Lake (CATL)	5-14	Outdoor Education Center, West Milford

IMPORTANT INFORMATION:

Completing this form *does not register* your child for camp. You must complete a camp registration form 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 on the basis of 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 June 15 to those who submitted completed applications by May 1. All requirements stated below must be met in order to receive funding. If you applied by May 1 and did not receive notification by June 20, please contact Lisa Aulisi at 973.415.6134.

Check Off Paperwork Attached:

- Completed Application (both sides)
- Proof of Income Attached (pay stubs, unemployment, SSI, etc.)
- Income Tax Attached (child's name must appear as dependent)
- Written letter supporting request for assistance (optional)
- Signature and Date on Application
- Proof of Residency Attached

RETURN ATTACHED FORMS TO: YMCA of Montclair, 159 Glenridge Avenue, Montclair, NJ 07042
Attention: Lisa Aulisi

Keep this page for your records!

YMCA OF MONTCLAIR

SUMMER CAMP SCHOLARSHIP/FINANCIAL ASSISTANCE APPLICATION

DEADLINE FOR SUBMITTING APPLICATION: May 1, 2021

Please Print Clearly:

Child's Name:			Age:	
Street Address:		Town:	State:	Zip:
Parent/Guardian Info	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 circling the camp below and 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.

Circle camp attending:

- **NA** for New Adventures
- **ND** for New Discoveries
- **CATL** for Camp at the Lake

CODE	Session	CODE	Session
	Session 1: June 28- July 2		Session 6: August 2 - August 6
	Session 2: July 5 – July 9		Session 7: August 9 – August 13
	Session 3: July 12- July 16		Session 8: August 16 – August 20
	Session 4: July 19 – July 23		Session 9: August 23 - August 27
	Session 5: July 26 – July 30		Session 10: August 30 - September 3 (NA & 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.

Depending on the camp selected, fees range from \$310 to \$395 per week.

What financial contribution do you feel you can make towards your child's camp expenses?

\$ _____ per week.

Will you need Extended Care for Camp? * Yes No

If yes, check care needed:

Before Camp offered at: New Adventures, New Discoveries

After Camp offered at: New Adventures, New Discoveries, Camp at the Lake

***Payment for extended care is the responsibility of parent or guardian**

FAMILY BACKGROUND INFORMATION:

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

Parent/Guardian (2):			
Street Address:	Town:	State:	Zip:
Home Phone:	Cell Phone:		
E-mail:			
Employment Status (Current): <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 June 15 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.

Parent / Guardian Signature

Date

RETURN ALL FORMS TO: YMCA of Montclair, 159 Glenridge Avenue, Montclair, NJ 07042
Attention: Lisa Aulisi

FOR OFFICE USE ONLY:

Date Received: _____ Sessions: _____ Letter Sent: _____
Total Amount Awarded: _____ Balance Due: _____