

**Jewish Federation of Greater Ann Arbor  
2018 Financial Assistance Application For Summer Camp**

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PLEASE COMPLETE ALL PAGES  
ONE PER FAMILY

**ADULT 1**

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Race/Ethnicity \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Annual Salary \_\_\_\_\_ Monthly Salary \_\_\_\_\_

Other Sources of Income \_\_\_\_\_ Monthly Amount \_\_\_\_\_

**ADULT 2**

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Race/Ethnicity \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Annual Salary \_\_\_\_\_ Monthly Salary \_\_\_\_\_

Other Sources of Income \_\_\_\_\_ Monthly Amount \_\_\_\_\_

**CHILDREN**

Total Number of Children \_\_\_\_\_ Children in household \_\_\_\_\_

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**MONTHLY EXPENSES** (of children's primary residence)

Rent  Own

Monthly House Payment	\$ _____	Monthly Car Payment(s)	\$ _____
Monthly Property Taxes	\$ _____	Monthly Bank Loan(s)	\$ _____
Monthly Utilities	\$ _____	Monthly Student Loan	\$ _____
Monthly Food	\$ _____	Monthly Temple/Synagogue	\$ _____
Monthly Insurance (Car, Life, Health)	\$ _____	Monthly School Tuition	\$ _____
		<b>Total Monthly Expenses</b>	<b>\$ _____</b>

Please explain any extenuating circumstances relative to monthly expenses \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INCOME INFORMATION**

Adjusted Gross Income 2017	\$ _____
Federal, State and Local Tax withheld	\$ _____
Social Security (FICA) Withheld	\$ _____
Total Taxes Withheld (add lines 1 & 2)	\$ _____
Total Tax Refund (Federal, State & Local)	\$ _____
Net Income After Taxes & Refund	\$ _____

**REQUIRED DOCUMENTS**

Please include with your application the following information:

- 1. A copy of your last year's filed tax returns.  
(Federal, State and Local)
- 2. A copy of your 2017 W-2 forms.
- 3. Verification of other sources of income.
- 4. Profit and Loss statement, if you're self-employed.

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We take into consideration individual circumstances and review all applications on an individual basis. The financial assistance/scholarship funds are available based on financial need and incomplete applications will be denied. By signing this application you will certify that the above information is true and correct. All applications will be kept confidential.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

***Scholarship applications will be accepted until April 13, 2018***

**Please return your application to:**  
Jewish Family Services of Washtenaw County  
Attention: Scholarship Committee  
2245 S. State St. Suite 200  
Ann Arbor, MI 48104



If you have questions please contact Haley Bank at JFS at [hbank@jfsannarbor.org](mailto:hbank@jfsannarbor.org)

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**2018 SUMMER CAMP INFORMATION**

Please complete this page **for each camper** you are requesting scholarship funds from the Federation. Print multiple copies of this page as needed.

Camper's Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Camp 1**

Name of Camp \_\_\_\_\_

Address of Camp \_\_\_\_\_

Session Duration / # of Sessions \_\_\_\_\_

Full Tuition Amount \$ \_\_\_\_\_ How Much Can You Pay? \_\_\_\_\_

**Camp 2** (if applicable)

Name of Camp \_\_\_\_\_

Address of Camp \_\_\_\_\_

Session Duration / # of Sessions \_\_\_\_\_

Full tuition amount \$ \_\_\_\_\_ How much can you pay? \$ \_\_\_\_\_

**Scholarship Information**

Important Note - Due to our limited resources, we expect that you will also apply for scholarship/subsidy funding available through the camp(s) that your child is planning to attend as well as other resources in the community.

Name of other scholarship/subsidies requested \_\_\_\_\_

Amount requested from other scholarships/subsidies \$ \_\_\_\_\_

**Total amount requested from the Jewish Federation of Greater Ann Arbor \$ \_\_\_\_\_**