

Summer 2017

Dear Applicant,

Thank you for your inquiry about Camp Scholarships. The Federation is pleased that through its Jewish Educational Services Committee, it will again be able to grant scholarships for youth attending Jewish residential camps this coming summer. The purpose of the scholarship program is to enable families with inadequate incomes to meet the costs of qualified programs to be able to send their child(ren) to Jewish residential camps. To check on the qualification of a program contact the scholarship coordinator.

Enclosed is a Financial Assistance Application Form for the 2016 summer sessions. Please note that a copy of your 2015 tax return must accompany your completed application (previous years return with current W-2 forms are accepted). Please be assured that all financial information will be held in the strictest of confidence and will remain in the Jewish Federation office. Please be aware that Federation funds should be considered a last resource once you have applied to all other sources. At a minimum, camp scholarship applicants must contact and apply to both your congregation and the Jewish Children's Regional Service (JCRS) in New Orleans (1-800-729-5277 or website [www.jcrs.org](http://www.jcrs.org) ...contact person is Janice Zuzalak: Janice@jcrs.org (504)828-6334) as they often have funds for this purpose. Please note that their deadline is February 15<sup>th</sup>. Inquire at the camp for additional scholarship funds available to their campers. Some years there is a first time camper scholarship from the Association of Jewish Camps (<http://www.jewishcamp.org/one-happy-camper>). You may also be aware of other organizations that provide assistance and you should contact them as well.

Return your completed forms to Becky Gunn, Jewish Federation of Nashville, 801 Percy Warner Blvd., Suite 102, Nashville, TN 37205. We are requesting that ALL FORMS BE RECEIVED IN THE FEDERATION OFFICE BY February 28, 2017. Please call if there will be a delay.

The committee evaluates an application based on many factors. If you have extenuating circumstances you may want to add a brief note. For further questions or if you need assistance in completing these forms, do not hesitate to call me.

Sincerely,

Becky Gunn  
Controller

(615)354-1624  
[becky@jewishnashville.org](mailto:becky@jewishnashville.org)

**FINANCIAL ASSISTANCE APPLICATION – CAMP PROGRAM**

To be completed by parents or guardian.

(All application forms should be printed in ink, or typed, and returned to the Jewish Federation  
**no later than February 28, 2017**)

1. Name of Applicant \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Name and Grade of School Currently Attending \_\_\_\_\_
  
2. Name of Parent(s) or Guardian(s) \_\_\_\_\_  
Address (if different from applicant's) \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Single \_\_\_\_\_ Widowed
  
3. With whom does applicant reside? \_\_\_\_\_
  
4. Number in Family \_\_\_\_\_
  
5. Congregational Affiliation \_\_\_\_\_

**(A copy of your 2015 tax return must accompany this form.  
It will be kept confidential in the Jewish Federation office.)**

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Signature of Applicant

**FOR OFFICE USE ONLY**

Application # \_\_\_\_\_ Date application received \_\_\_\_\_  
Scholarship amt. requested \_\_\_\_\_ Scholarship amt. approved \_\_\_\_\_  
Date scholarship sent \_\_\_\_\_  
Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Application Number\_\_\_\_\_

6. PROGRAM INFORMATION

A. Name of Camp Program to which application is made\_\_\_\_\_

B. Dates you wish to attend\_\_\_\_\_

C. Reason(s) for wanting to attend this program\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. Has applicant attended this program in the past? \_\_\_\_\_ If yes, how many years?\_\_\_\_\_

7. Please indicate approximately how much the child may be able to contribute to the cost of the program. (Some examples of sources might be Bar/Bat Mitzvah gifts, birthday money, baby-sitting or part-time job earnings.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Please indicate to which of the following organizations you have applied for scholarship assistance and the amount awarded, if known. **NOTE: IF YOU ARE APPLYING FOR A CAMP SCHOLARSHIP, YOU MUST FIRST CONTACT AND APPLY TO AT LEAST JEWISH CHILDREN'S REGIONAL SERVICE (JCERS) AT 1-800-729-5277 AND YOUR CONGREGATION**

A. \_\_\_\_ Jewish Children's Regional Service \$\_\_\_\_\_

B. \_\_\_\_ Your own congregation, if affiliated \$\_\_\_\_\_

C. \_\_\_\_ Other(s) Please give name(s) and amount(s) of scholarship. \_\_\_\_\_

\_\_\_\_\_

9. Have you or any member of your immediate family received in the current year scholarship funds from the Nashville Jewish Federation for any summer program or schooling other than that applied for herein? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please specify the program/school and the amount received.\_\_\_\_\_

\_\_\_\_\_

Application Number \_\_\_\_\_

10. FINANCIAL INFORMATION

A. Employment of all working members of household:

<u>Name of Employed</u>	<u>Occupation</u>	<u>Current Monthly Income</u>	<u>Net Monthly Income</u>

Amount of income (gross) family earned in previous year? \_\_\_\_\_

B. Other sources of income:

Income from real estate: \$ \_\_\_\_\_

Income from stocks and bonds: \$ \_\_\_\_\_

Social Security benefits: \$ \_\_\_\_\_

Annuities or pensions: \$ \_\_\_\_\_

Alimony and/or child support: \$ \_\_\_\_\_

Gifts: \$ \_\_\_\_\_

Other income (Specify Source): \$ \_\_\_\_\_

C. Family Monthly Expenses:

Rent Monthly Payments \$ \_\_\_\_\_

Mortgages – total debt \$ \_\_\_\_\_ Monthly Payments \$ \_\_\_\_\_

Car notes - total debt \$ \_\_\_\_\_ Monthly Payments \$ \_\_\_\_\_

Other Outstanding debts/time payments (kind) \_\_\_\_\_ Monthly Payments \$ \_\_\_\_\_

Total Debt \_\_\_\_\_ Monthly Payments \$ \_\_\_\_\_

Medical/Dental Costs – total \$ \_\_\_\_\_ Monthly Payments \$ \_\_\_\_\_

Explanation: \_\_\_\_\_

Educational expenses of family members \$ \_\_\_\_\_

Explanation: \_\_\_\_\_

Care of relatives – degree of relationship \$ \_\_\_\_\_

Amount of contribution \$ \_\_\_\_\_

D. Estimate of Family Expenses/Income per month:

Income \$ \_\_\_\_\_

Expenses: \$ \_\_\_\_\_

Application Number \_\_\_\_\_

E. Savings (State total amount in each category):

Savings Accounts \$ \_\_\_\_\_  
Pensions \$ \_\_\_\_\_  
Market value of real estate property owned: \$ \_\_\_\_\_  
Other (Specify): \$ \_\_\_\_\_

F. Any Unusual situations or expenses? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

G. Please explain the following if applicable:

Substantial Difference in Income and Expenses \_\_\_\_\_

\_\_\_\_\_

Any significant change in gross income within the last 12 months \_\_\_\_\_

\_\_\_\_\_

Any Extraordinary Expenses \_\_\_\_\_

\_\_\_\_\_

11. SCHOLARSHIP REQUEST

A. Cost of Program	\$ _____
B. Transportation Cost	\$ _____
C. Total Cost (Lines A plus B)	\$ _____
D. Amount family can afford (including funds from child)	\$ _____
E. Financial assistance needed (Line C minus Line D)	\$ _____
F. Financial assistance received from other sources (Total of question #8 on Page 2)	\$ _____
G. Amount of scholarship requested from Federation (Line E minus Line F)	\$ _____

12.

Because scholarship funds are limited and your full request may not be granted, would you be able to supplement the award that is given? Please explain. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- 
13. Parents must sign and date the waiver below permitting Jewish Federation to have contact with other organizations that give scholarships.

Return to:

Jewish Federation of Nashville

For additional information, call 354-1624

Attn: Becky Gunn

801 Percy Warner Blvd.

Nashville, TN 37205

## Authorization to share information

Re: Federation summer camp scholarships

I hereby give permission to the Jewish Federation to share information regarding financial awards to recipients with other local organizations that also give camp scholarships. The sole purpose of sharing this information is to eliminate the possibility of a family receiving total funds that exceed actual camp costs. I realize that my child could be denied a scholarship if the Federation staff or any other organization feels that a family is not totally candid in the information it provides in the summer camp scholarship process.

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(Parent)

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(Parent)

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(Date)