

JCC Kaleidoscope Creative Arts & Science Camp

At the Leventhal-Sidman JCC
333 Nahanton Street
Newton Centre, MA 02459
(617) 244-5124; (617) 558-6523

FOR OFFICE USE ONLY	
Date Received	_____
Family Number	_____
Total Fee	_____
Scholarship	_____
Balance Due	_____

2010 REQUEST FOR ADJUSTED FEE

Important: Read the following carefully before completing this application. You must follow all directions and have complete paperwork in order for your application to be considered. Make sure supporting documentation and other forms are included along with your deposit. Questions: call 617-558-6523.

Camper's Name _____ Age _____ Session attending camp? _____
Sibling's Name _____ Age _____ Session attending camp? _____
Address _____ City _____ Zip _____ Phone (____) _____

1. Please return this form to the camp office **before April 1**. Forms received after that date will be reviewed only if funds remain.
2. To apply for financial aid, **return this form** with the **camper application**, including the **appropriate deposit**. If within two weeks of the scholarship award, you determine that you cannot afford camp tuition, your deposit will be returned.
3. A copy of your **2008 income tax forms**, a copy of each of your **2008 W2s**, and a **current pay stub** of each working adult member of the household ***must*** be submitted with this form. If you do not file income tax forms, include a letter of validation from your source of income (e.g. Welfare Dept., Social Security or University). No scholarship application will be accepted without the requested documentation. ***(Please Note: A copy of your 2009 income tax forms and W2's must be forwarded to the camp office on or before April 15, 2010.)***
4. If this is your first time applying for financial aid, you must schedule an interview with the camp director. PLEASE NOTE THAT THE CAMP CAN ONLY PROVIDE UP TO 50% OFF THE CAMP TUITION irrespective of extended day, early drop off and transportation fees. The applicant is responsible for the remainder of the tuition. No one will receive aid without supplying the required supporting documentation.
5. If you have applied for financial aid in the past, an interview is not required, but we will still need proof of your income (as indicated above) in order to make a decision.
6. On approximately April 15 we will notify you, by mail, of the exact amount the camp can offer you. This statement will include the balance due which must be paid in full by May 15. If you wait until after April 1 to apply, it is likely you will receive less financial aid based on the availability of the remaining funds.

Mother's Name _____ Occupation _____ Bus. Phone _____
Father's Name _____ Occupation _____ Bus. Phone _____
Married _____ Single _____ Separated _____ Divorced _____ Widow _____
Dependents, age and relationship _____

Who else lives in the household? _____

Residence: _____ Own Single Family _____ Own Multiple Family _____ Rent

Last name _____

2009 Income (for the year)

Wages and Salaries _____

Public Assistance _____

Food Stamps _____

Other _____

Unemployment Compensation _____

Income from Other Sources _____

Total 2009 Gross Income \$ _____

2009 Expenses (for the year)

Medical (incl.insurance) _____

Rent or Monthly Mortgage
(Including principal, interest and taxes) _____

Day School Tuition _____

Hebrew School _____

Child Care _____

College _____

Number of Cars _____

Make _____ Year _____

Make _____ Year _____

Outstanding loans _____

Total Monthly Loan Payments _____

Total 2009 Expenses \$ _____

If your family was referred to Kaleidoscope Camp by any other social agency, please indicate the agency, phone number and your designated staff person. (This may allow us to explore possibilities for joint subsidy of your child's tuition.)

How much do you feel that you can afford toward tuition? _____

Are there any relatives or other individuals in a position to help with camp tuition? YES NO

How much can they contribute? _____

Please describe any special circumstances which affect your ability to pay regular tuition fees.

If you are divorced, what are the current financial arrangements regarding support? _____

Did your child attend Kaleidoscope Camp last summer? _____

Did your child previously receive a Kaleidoscope Camp scholarship? _____ If so, what year(s)? _____

I attest that the information above is true and complete. Print name: _____

Signature _____ Date _____