



2019 Summer Camp Financial Aid Application

Please fill out the following information clearly:

Name (First, Last): _____ Date: _____

The following additional identity and income information is necessary in order to continue processing your request for financial aid:

1	_____	Copy of W2 Form (Current and last year's)
2	_____	Copy of Original 1040 Form (Current and last year's)
3	_____	Copy of Tax Return (Current and last year's)
4	_____	Copy of Pay Stubs (Current and last)
5	_____	Copy of other income source (social security, welfare card, child support*, etc.)
6	_____	Copy of divorce decree or separation agreement
7	_____	Rent receipt or copy of lease
8	_____	Copy of Driver's License
9	_____	Copy of Auto Insurance Policy
10	_____	Copy of Phone Bill and/or Cell Phone Bill
11	_____	If separated, please provide proof of spouse's utility bill at different address (ie: gas, electric)
12	_____	Copy of proof of citizenship (copy of a birth certificate or U.S. Passport)
13	_____	Other _____

2019 SUMMER CAMP

Financial Aid Applications will **ONLY** be accepted **January 12th through January 26th, 2019**. There will be **NO** exceptions. Applications **MUST** be completed or they will not be considered.

The Financial Aid staff will review applications thoroughly and decisions will be announced by mail from among the applicants.



The Greater Morristown YMCA

FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

Please note: filling out our Financial Assistance Application does **NOT** guarantee scholarship assistance. A review of the application will follow submission and you will be contacted concerning the outcome. Incomplete forms will not be processed.

Financial Aid applies to only those who reside in:

Cedar Knolls	East Hanover	Whippany	Morris Plains	Morristown
Morris Township	Convent Station	Chester	Harding Township (certain sections)	Mendham

Recipient's Information:

Name (First, Last): _____ D.O.B. _____

Street Address: _____ Apartment #: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Alternate Phone: _____

E-Mail Address: _____

Household Information *(please list all members of the household):*

	Name	Relationship	Date of Birth
1			
2			
3			
4			
5			

Marital Status:	Married	Separated	Divorced	Other
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Employment Information:

Place of Employment: _____

Address: _____

Street

City:

State:

Zip Code:

Supervisor's Name: _____ Phone Number: _____



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Spouse's Employment Information:

Place of Employment: _____

Address: _____
Street City: State: Zip Code:

Supervisor's Name: _____ Phone Number: _____

Financial Information: Please include gross household income from ALL sources:

1	Salary	\$ _____ Per Year
2	Social Security	\$ _____ Per Year
3	Unemployment	\$ _____ Per Year
4	Public Assistance	\$ _____ Per Year
5	Child Support	\$ _____ Per Year
6	Disability	\$ _____ Per Year
7	Other	\$ _____ Per Year
TOTAL		\$ _____ Per Year

The following documents must be submitted with this financial aid application. The Greater Morristown YMCA will verify all documents submitted for accuracy.

1	_____	Copy of W2 Form (<i>Current and last year's</i>)
2	_____	Copy of Original 1040 Form (<i>Current and last year's</i>)
3	_____	Copy of Tax Return (<i>Current and last year's</i>)
4	_____	Copy of Pay Stubs (<i>Current and last</i>)
5	_____	Copy of other income source (<i>social security, welfare card, child support*, etc.</i>)
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*If no child support is received, please submit a letter explaining the reason and documentation of efforts to collect.

Please list current work schedule:

Day	Morning Hours	Evening Hours
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

Additional Information:

Please use this space to list any other information that may pertain to this application. Additional pages may be attached.

I certify that the information provided in this application and the attachments are complete and true to the best of my knowledge. I agree to inform the Greater Morristown YMCA of any changes that may affect the information given.

Print Name	
Signature	
Date	