

CAMPERSHIP APPLICATION CHECKLIST

SEND COMPLETED APPLICATION: Email to michelle@jfcs.org or Efax to (844) 492-3928				
JFCS CAMPERSHIP APPLICATIONS WILL BE ACCEPTED FROM:				
	JANUARY 1, 2021 THRU MARCH 31, 2021*			
APPL	ICATION INFORMATION:			
	Personal Information Form (attached)			
	Monthly Income & Expense Form (attached)			
	Personal Financial Statement Form (attached)			
	Fund Request Form (attached)			
ADDI	TIONAL REQUIRED DOCUMENTS (if applicable):			
	Confirmation letter from the summer camp your child will be attending			
	Letter/Email from your congregation/temple on any camp funding (if applicable)			
	Scholarship(s) from any other organization providing funds (if applicable)			
	Financial aid award letter from your child's camp (if applicable)			
	Latest billing statement from your child's camp showing all deposits, payments made to date			
	A copy of your 2019 Federal Tax Returns* *No campership will be disbursed until the required tax return has been submitted.			

*ALL QUALIFIED APPLICANTS WILL BE CONSIDERED FOR A CAMPERSHIP ON A FIRST COME/FIRST SERVED BASIS.

Campership ScholarshipJFCS of San Francisco, the Peninsula, Marin & Sonoma Counties

Applicant (child's) Name:		Date of Birth:
Permanent (home) Address:		
E-mail (Child's):		Cell Phone: ()
Name of child's School:		
Jewish summer camp attending:		
Address of summer camp:		
Length of program:	Dates of	attendance:/
How did you learn about our Ca	mpership Progra	m?
If you are a past JFCS campersh	ip recipient, plea	ise indicate the following:
Date awarded campership		amount received
Date awarded campership		amount received
PLEASE CHECK ONE OF THE		L INFORMATION FORM
Information below is for:	Parent (P)	Legal Guardian (L)
(P)(L)#1Name:		Email:
(P)(L)#2Name:		Email:
(P)(L) #1Permanent Address:		Home Phone: ()
(P)(L) #1Permanent Address:		Home Phone: ()
(P)(L)#1Cell Phone: ()		(P)(L)#2 Cell Phone : ()
(P)(L)#1 Job:	Employer: _	Work Phone: ()
(D)(I)#2 Joh:	Employee	Work Phone: ()

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PARENT'S YEARLY INCOME & EXPENSE FORM

INCOME Gross Wages (1) Self Employed Income Child Support Interest & Dividends Net Rental Income (2)	TOTAL YEAR INCOME	
Family Support SSI or SSDI		
Others:		
TOTAL INCOME:		<u>\$</u>
	TOTAL YEAR EXPENSE	
<u>EXPENSES</u>		
Rent/Mortgage		
HOA Payments		
Food/Household Supplies		
Utilities/Water/Garbage		
Phone-Internet		
Transportation (3)	- 	
Health Insurance		
Medical (out of pocket)	- 	
Life/Disability Insurance	- 	
Automobile Insurance	- 	
Homeowner/Renter Insurance	- 	
Auto Loan/Lease Payments		
Educational Loan Payments (4)		
Federal Taxes		
State Taxes		
Property Taxes		
TOTAL EXPENSES:		\$
NET SURPLUS:		<u>\$</u>

- (1) Gross wages.
- (2) Net income (gross income-less business expenses)
- (3) If you own a vehicle, include all vehicle costs plus monthly auto loan/lease payment. If you do not own a vehicle, list the cost of local public transportation.
- (4) Do *not* include loans that have payments starting *after* the completion of program/school.

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PARENT'S PERSONAL FINANCIAL STATEMENT FORM

ASSETS	LIAB	ILITIES
Cash in Banks (Schedule 1)	\$ Loans Payable (Schedule 5)	\$
Stocks & Bonds(Schedule 2)	\$ Mortgages (Schedule 4)	\$
Retirement Funds	\$ Credit Cards (Schedule 5)	\$
Personal Property	\$ Unpaid Federal/State Taxes	\$
Vehicles (Schedule 3)	\$ Educational Loans	\$
Real Estate (Schedule 4)	\$ Personal Loans	\$
Notes Receivable	\$ Medical Debts	\$
Other Assets	\$ TOTAL LIABILITIES	\$
TOTAL ASSETS	\$ ASSETS minus LIABILITIES	<u>\$</u>

PARENTS PERSONAL FINANCIAL STATEMENT SCHEDULES

<u>Scheaule 1</u>	Cash in Banks (include	Money Market Accounts, Treas	sury Notes & Certifica	<u>ites)</u>
	Source			Present
	of Cash	Bank Name		Balance
				\$
			TOTAL	•
			TOTAL	\$
Schedule 2	Stocks and Bonds			
				Current Market
Investment Type		Description		Value
				\$
			TOTAL	\$
				- <u> </u>

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PARENT'S PERSONAL FINANCIAL STATEMENT SCHEDULES (continued)

Schedule 3	Vehicles (Include Aut	os, Trucks, RV's,	Boats, Motorcycl	es, and Trailers)
Model	Date		Current	Loan	Monthly
Year	Purchased		Value	Balance	Payment
			\$	\$	\$
	TOTALS		\$	<u> </u>	<u> </u>
Schedule 4	Real Estate	(Indicate ty	pe: P-Principal R	esidence, R-Ren	<u>ital Property)</u>
Type of	Date	Current	Morto		onthly
Real Estate	Purchased	Value		-	/ment
		\$	\$	\$	
	TOTALS	\$	\$	\$	
Schedule 5	Installment Obligation	ns (Include all cred	dit cards)		
Creditor's Nar	me	Obligation		Current Balance	Monthly Payment
		- Jungamen		\$	-
			TOTAL	\$	<u> </u>
me/us for the employer(s)	e purpose of evaluating	this application, is so authorize you t	ncluding obtaining optoining optoile credit	ng credit bureau	ze you to make inquiries reports and contacting m out your credit experience
<u>X</u>		 		Date:	
	P1/L1 Signature	9			
<u>X</u>				Date:	
	P2/L2 Signature	9			

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Fund Request Form

SCHEDULE OF COSTS FOR	WEEKS:		
Camp Tuition		\$	
Supplies		\$	
Transportation		\$	
Other:		Ф	
-	_	\$	
	_	\$	
TOTAL CAMP COSTS:		\$	
FUNDS AVAILABLE FOR CAMP:			
FUNDS A VAILABLE FOR CAMII.			
<u>GRANTS</u>		ф	
Camp Financial Aid (pending)	/'C 1' '11 \	\$	
One Happy Camper Scholarship	(if eligible)	\$	
Congregation/Temple funding Other:		\$	
Other: Other:		\$ \$	
OTHER SOURCES			
Parent Contributions		\$	
Relative Contributions		\$	
Applicant's Earnings		\$	
TOTAL INCOME:		\$ (<u>)</u> NE 7
FUNDS NEEDED:		\$	