ALAN SILVERMAN CAMP DIRECTOR DR. ZEV JACOBSON CHAIRMAN CAMP COMMITTEE

CAMP MOSHAVA FINANCIAL AID APPLICATION

Please be advised of the following procedures to apply for a tuition scholarship:

- 1) No scholarship applications will be considered without a camper application and deposit for each child. If awarded a scholarship which does not meet your needs, the deposit <u>minus</u> a \$25.00 processing fee will be returned upon withdrawal of your application <u>in writing</u>. Deposits are \$350.00 for a single session per child and \$350.00 for the full season per child.
- 2) Scholarship applications are reviewed by our Scholarship Committee during annual meetings in January, February and March. You will be notified immediately after the application is reviewed, in writing, of the Committee's decision.
- 3) Because Camp Moshava has a very limited Scholarship Fund, please be advised that scholarships, out of necessity, are usually quite limited.
- 4) We recommend that you fill out this application completely AND attach a note explaining clearly why you feel it is essential that Camp Moshava grant a scholarship. We also recommend that the amount of your tuition subsidy request be accurate, NOT an inflated sum, in the hope that then you will receive what you actually need.
- 5) Please make a copy of your scholarship application and supporting materials.

Thank you.

CAMP MOSHAVA APPLICATION FOR SCHOLARSHIP

OR CAMPERS:				
ADDRESS: _				
- TELEPHONE #	:		BNEI AKIVA MEMBER: Y	es NO
SESSION: F	ULL	_ FIRST SESSION	SECOND SESSIO	N
ATTENDED MC	SHAVA II	N 2018?		
RECEIVED A S RECEIVED A S	CHOLARS	SHIP IN 2018? SHIP IN 2017?	_ IF YES, WHAT AMOUNT? _ IF YES, WHAT AMOUNT?	
CONFID	ENCE. AL	L QUESTIONS MUST B		ESSED IN THE STRICTEST OCUMENTATION SUBMITTED ISIDERED.
The Undersigne	d hereby a	applies for a tuition subsid	dy of: \$	
		EMDLOVMENT IN	IEODMATION	

EMPLOYMENT INFORMATION

	FATHER	MOTHER
NAME		
PROFESSION/ BUSINESS		
FIRM NAME		
ADDRESS		
TELEPHONE		
YEARS WITH FIRM		
POSITION HELD		
DO YOU OWN THE BUSINESS?		

INCOME AND EXPENSE INFORMATION

INCOME/ EXPENSE	2017	2018	2019 ESTIMATED
Total # of Exemptions (IRS 1040)			
Wages, Salaries, Tips – FATHER			
Wages, Salaries, Tips - MOTHER			
Interest, Investment Income			
Net Income from Business			
Income (IRS Form 1040)			
US Income Tax Paid			
Payments to IRAs, KEOGH, Retirement Plans			
Medical/ Dental Expenses NOT PAID by insurance			

FAMILY INFORMATION

Are parents married?			
If both parents are not living toget	ther, please	e explain:	
NAMES OF CHILDREN	AGE	SCHOOL	ACTUAL TUITION PAID
Do you or your wife own a car? _		_	
MAKE		YEAR	
MAKE		YEAR	

Did you take a family vacation during the	past two years?	_	
If yes, for how long: Please des	scribe below:		
	ARENT'S ASSETS		-
REAL ESTATE	YOUR OWN HOME	OTHER PROPERTY	1
Present Market Value			
Unpaid Mortgage			
Amount of Homeowner's Insurance			
Monthly Mortgage Payment			
Do you rent your apartment?			
How long in this apartment?	How many roo	ms?	
Please attach a copy of your 10 documentary evidence that wi this information and material, v	Il assist the Committee in	its decision making prod	
THE INFORMATION IN THIS APPLICATION SUBSIDY AT THIS APPLICATION ARE TRUE.			
SIGNED:Name (Parent or Guardian	DATE: _ n)		