



## Financial Aid Instructions 2020

### IMPORTANT INFORMATION FOR APPLICANTS:

1. Applications must be completed in FULL in order to be processed. If a certain question does not apply to you, please enter N/A (not applicable) so we know you did not miss that question.
2. The information that you provide will be checked and we may ask you to send additional information.
3. Please make sure to enclose the first two pages of your entire household's completed Federal Income tax forms for the year 2019. Where applicable, return additional documentation with your application (e.g. social security, child support, alimony, etc.) to prevent delays in processing. If not provided, this will delay review of your application.
4. Campership assistance can range from 10% to 100% and is based on the USDA Family Size/Income Scale for Free Meals and other factors.
5. Campership Applications are reviewed by a committee. Camperships will be provided on a first come, first serve basis. We are only able to provide camperships to NJ residents at this time.

Please note: we try to keep all financial information as confidential as possible, but we ask for your social security number to be blocked or whited out when submitting if possible.

Please complete the application and submit as soon as possible.



## 2020 FINANCIAL AID APPLICATION

**Incomplete applications will not be processed**

Camper's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Parent/Guardian completing application \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Camper lives with  Both Parents  Single Parent  Relative  Foster Family  Other \_\_\_\_\_

Total number of people in household \_\_\_\_\_

How much of the full camp fee does your family expect to pay? \_\_\_\_\_

| Type of Income:                                    | Acceptable Proof of Income Documentation  | Amount of Gross Income Per Year |
|--|---|---------------------------------|
| 1. Earnings & Wages                                | First two pages of <u>2019</u> tax return (camper must be listed as dependent)                                  | \$ _____                        |
| 2. Child support and/or alimony                    | Court order paper for child support and/or alimony  | \$ _____                        |
| 3. Social Security, retirement, government support | Letter from U.S. Government detailing social security or government support, or 2019 retirement income document | \$ _____                        |

If your income is \$0, how do you pay for food, housing, and other living expenses? Please attach a separate sheet of paper with that information.

DCP&P (formerly DYFS) – Fill out section below if child is currently working with a caseworker. Many agencies will assist with payment.

Case worker's name \_\_\_\_\_

County agency and phone number \_\_\_\_\_

**What is the best time and phone number to call and review your financial aid application?**

**Time** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

I certify that all of the information included on this application is true and correct and that all income is reported. I understand that this information is being given for the possibility of financial aid from the Diabetes Foundation. Program officials may verify the information on the application. Deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws.

Signature of Parent/Guardian completing application \_\_\_\_\_

Date \_\_\_\_\_