

Financial Assistance Application 2012



JCC of Greater Orlando

FOR OFFICE USE ONLY

Applicant Last Name: _____

Child's Name(s): _____

Application Deadline: March 15, 2012
Notification: By April 30, 2012

How To Apply

Please collect and complete the following in order to process your Financial Assistance request. All documents and deposits must be submitted together. Requested information is strictly confidential. If you are a current JCC member or participate in JCC programs, any and all outstanding balances must be paid in full prior to submitting your financial assistance application.

Financial Assistance Application

Complete the following form and provide all required documentation.

JCC Membership Application (for new JCC members only)

Program Registration Forms

Complete all appropriate Early Childhood Learning Center, J University, and/or Summer Camp forms. Contact each program department to obtain the necessary form(s).

EFT and Credit Card Form

All Financial Assistance recipients must make payments of all balances via EFT. A credit card number must be provided (to be kept on file) and will only be used in extenuating circumstances.

Deposit \$375 for Early Childhood Learning Center; \$100 for Summer Camp. Check may be made payable to JCC of Greater Orlando. To be applied to the balance of all fees associated with the program(s). \$25 of your deposit is non-refundable.

Certified Copies of two previous years' Federal Tax Return & W-2 Form (for both parents and including all pages and schedules. If self-employed, please provide business returns).

Additional Required Financial Records

- Current YTD Pay Stubs (both parents)
- 401K and mutual fund accounts (all pages)
- Most current bank statements (all accounts)
- Request for Transcript of Tax Return (IRS Form 4506-T)

Financial Records (if applicable)

- Mortgage Statement
- IRS Forms 1099-B, 1099-DIV, 1099-NT
- Social Security/Disability Statement
- Alimony/Child Support Verification

Note: All IRS forms can be found at www.irs.gov.

I/we have successfully submitted all of the above documents and deposits.

Parent 1/Guardian signature _____ Date _____

Parent 2/Guardian signature _____ Date _____

How To Submit

Mail or bring your complete set of documents and deposits to the scholarship manager at your primary campus. Faxes and e-mails are not accepted.

Eli Bercovici
Roth JCC's Maitland Campus
851 N. Maitland Ave.
Maitland, FL 32751
407-645-5933 x259
elib@orlandojcc.org

Jill Schwartz
JCC's Jack & Lee Rosen Southwest Orlando Campus
11184 S. Apopka-Vineland Rd.
Orlando, FL 32836
407-387-5330 x103
jills@orlandojcc.org

DATE RECEIVED (STAFF ONLY)



Financial Assistance Application 2012



Application Deadline: March 15, 2012
Notification: By April 30, 2012

LOCATION

- Maitland Campus Rosen South Orlando Campus

Both parents are required to complete the application and supply a certified copy of their Federal Tax Returns & W-2 Forms.

Parent/Guardian 1

RELATIONSHIP TO CHILD(REN)				
<input type="checkbox"/> Parent		<input type="checkbox"/> Step Parent		<input type="checkbox"/> Guardian
<input type="checkbox"/> Other _____				
FIRST NAME	MI	LAST NAME	ADDRESS	CITY/STATE/ZIP
HOME PHONE	CELL PHONE		EMPLOYER PHONE	E-MAIL
EMPLOYER NAME			EMPLOYER ADDRESS	EMPLOYER CITY/STATE/ZIP
# OF YEARS WITH EMPLOYER	TITLE/POSITION		TAX RETURN FILING STATUS	
<input type="checkbox"/> Married <input type="checkbox"/> Head of Household <input type="checkbox"/> Single				

Parent/Guardian 2

RELATIONSHIP TO CHILD(REN)				
<input type="checkbox"/> Parent		<input type="checkbox"/> Step Parent		<input type="checkbox"/> Guardian
<input type="checkbox"/> Other _____				
FIRST NAME	MI	LAST NAME	ADDRESS	CITY/STATE/ZIP
HOME PHONE	CELL PHONE		EMPLOYER PHONE	E-MAIL
EMPLOYER NAME			EMPLOYER ADDRESS	EMPLOYER CITY/STATE/ZIP
# OF YEARS WITH EMPLOYER	TITLE/POSITION		TAX RETURN FILING STATUS	
<input type="checkbox"/> Married <input type="checkbox"/> Head of Household <input type="checkbox"/> Single				

Household

RELATIONSHIP STATUS BETWEEN PARENTS/GUARDIANS		WHO CLAIMS THE APPLICANT FOR TAX PURPOSES?	
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Partner <input type="checkbox"/> Other _____		<input type="checkbox"/> Both <input type="checkbox"/> Each parent in alternating years <input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2	
TOTAL EXEMPTIONS CLAIMED ON MOST RECENT FEDERAL TAX RETURN			
_____ Parent(s) + _____ Children + _____ Other = _____ Total			
FUNDING FROM GRANDPARENT/RELATIVE		HOW MUCH CAN YOU (AND YOUR SPOUSE) CONTRIBUTE TO THE TOTAL TUITION/PROGRAM FEES?	
\$ _____		\$ _____	
HAVE YOU RECEIVED FINANCIAL ASSISTANCE FROM THE JCC IN THE PAST?		IF YES, FOR WHAT YEAR(S) AND PROGRAM(S)?	
<input type="checkbox"/> Yes <input type="checkbox"/> No			

We are applying for financial aid for the following child(ren):

CHILD #1 NAME	<input type="checkbox"/> Preschool <input type="checkbox"/> After School	<input type="checkbox"/> Camp	DATE OF BIRTH	NAME OF SPECIFIC PROGRAM	EST. TUITION (REQUIRED)
CHILD #2 NAME	<input type="checkbox"/> Preschool <input type="checkbox"/> After School	<input type="checkbox"/> Camp	DATE OF BIRTH	NAME OF SPECIFIC PROGRAM	EST. TUITION (REQUIRED)
CHILD #3 NAME	<input type="checkbox"/> Preschool <input type="checkbox"/> After School	<input type="checkbox"/> Camp	DATE OF BIRTH	NAME OF SPECIFIC PROGRAM	EST. TUITION (REQUIRED)
CHILD #4 NAME	<input type="checkbox"/> Preschool <input type="checkbox"/> After School	<input type="checkbox"/> Camp	DATE OF BIRTH	NAME OF SPECIFIC PROGRAM	EST. TUITION (REQUIRED)
CHILD #5 NAME	<input type="checkbox"/> Preschool <input type="checkbox"/> After School	<input type="checkbox"/> Camp	DATE OF BIRTH	NAME OF SPECIFIC PROGRAM	EST. TUITION (REQUIRED)

Additional Educational Expenses for Dependents (excluding JCC expenses):

MEMBER OF HOUSEHOLD	SCHOOL NAME	GRADE LEVEL FOR 2011-2012 YEAR	TUITION	FINANCIAL ASSISTANCE FROM ALL SOURCES	PARENT PAYS ANNUALLY (TUITION MINUS FINANCIAL ASSISTANCE)
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
TOTAL			\$	\$	\$

Income & Expenses

ANNUAL INCOME	AMOUNT	AVERAGE MONTHLY EXPENSES *	AMOUNT
Parent 1 Gross Wages	\$	Rent or Mortgage (include real estate taxes)	\$
Parent 2 Gross Wages	\$	Household Expenses, Food, Utilities, etc.	\$
Interest Income	\$	Medical Out-of-Pocket Expenses	\$
Dividend Income	\$	Auto Loan or Lease Payments	\$
Alimony Income	\$	Gas, Car Insurance, Maintenance, Local Transportation	\$
Business Income (Schedule C)	\$	Alimony and Child Support Expense	\$
Capital Gain (Loss) (Schedule D)	\$	Monthly Tuition Expense (daycare, private school, college, etc.) <i>Refer to "Parent Pays Annually" in previous chart and divide total by 12.</i>	
Pensions, Annuities & IRA Distribution	\$	Children's Extracurricular Expenses (sports, lessons, tutor, etc.)	
Real Estate Income (Loss) (Schedule E, page 1)	\$	Other Insurance Expense	\$
Partnerships, S-Corps, Trusts & Estates	\$	Total MONTHLY EXPENSES	\$
Unemployment, Disability, VA Benefits	\$		
Social Security	\$		
Other Government Assistance	\$		
Child Support Income	\$		
Indirect Child Support (expenses paid by others on behalf of your child)	\$		
Total ANNUAL INCOME	\$		

* excludes credit card debt

Investment Real Estate Owned

ADDRESS, CITY, STATE, ZIP	DATE OF PURCHASE	PURCHASE PRICE	CURRENT MORTGAGE

Guidelines & Policies

1. Financial Assistance is available to JCC members only. If you are not a JCC member, please contact the campus of your choice for details. All are welcome.
2. The deadline to apply is March 15, 2012. All/Any outstanding JCC fees must be paid in full prior to applying for and receiving Financial Assistance. After that date, applications will still be accepted, however, aid will only be provided if funds are available.
3. Financial Assistance will be awarded beginning on April 30, 2012.
4. All proper paperwork (forms and required documents) must be completed and turned in (all at one time) to the appropriate campus. Incomplete paperwork will not be accepted.
5. The amount of Financial Assistance awarded is based on family need, space availability in the program(s) desired, and the overall dollars available (at the time the application is received).
6. Once the amount of Financial Assistance is determined, a person(s) has seven days to accept the award, arrange a payment plan, and sign the agreement.
7. All Financial Assistance recipients must make their payments via EFT (Electronic Funds Transfer) and provide a credit card number (to be kept on file).
8. The JCC tuition-based programs eligible for Financial Assistance are;
 - Early Childhood Learning Center - 2012-2013 (max. of \$1,000 for infant and baby rooms)
 - J University After School Program - 2012-2013 (full-day program only)
 - Summer Camp - 2012 (Scholarships may be given in smaller amounts or not at all for specialty camps or camps with field trips.)
9. If your financial situation changes (i.e. - you become employed, your employer changes, change in marital status, etc.), you must notify us of all changes so that we can update your file. If you are unemployed, our financial assistance manager will follow up with you on a quarterly basis to check on your employment status.
10. The JCC reserves the right to modify your agreement at any time, based on the financial situations of the applicant and/or the JCC for any other reason.
11. If one or both parents is not working, financial assistance will only be provided for part-time ECLC programs, and Camp J: In the Zone summer camp programs. If a family chooses to register for a full-time class, they would be responsible to pay 100% of the difference between the part-time and full-time tuition for those programs. Employment status does not affect the amount of financial assistance being requesting for J University.
12. All Financial Assistance recipients are required to volunteer a minimum of 10 hours (between June 15, 2012 and May 31, 2013) at the JCC. There are a number of special events, committees, and/or operational functions to choose from throughout the year. It is your responsibility to work with the Scholarship Manager to fulfill this requirement.
13. All recipients need to reapply annually.

I/we understand and accept the above guidelines and policies.

Parent 1/Guardian signature _____ **Date** _____

Parent 2/Guardian signature _____ **Date** _____

Agreement

Please read the paragraphs below carefully before signing.

I, the undersigned, understand that the information I provide must be accurate and verifiable. I agree to provide any additional information that the JCC reasonably requests, and to allow the JCC to make such reasonable inquiries as it deems necessary in this regard, including without limitation, to banking institutions and credit reporting agencies. I further authorize the JCC to make additional inquiries they consider necessary to assure accuracy of the information provided.

I understand that if any of the foregoing information is inaccurate, the JCC may take appropriate action in its sole discretion, including without limitation, the withdrawal of any scholarship assistance, and the suspension or revocation of my membership.

In addition, I acknowledge that in the event that my scholarship assistance is withdrawn, but my membership privileges are still extended by the JCC, I will be expected to pay the balance of the prevailing membership fee or will forfeit my membership.

I authorize the JCC to share this information with one or more scholarship committee members for the purpose of granting a scholarship award. I further authorize the JCC to make additional inquiries they consider necessary to assure accuracy of the information provided.

I/we understand and accept the above agreement.

Parent 1/Guardian signature _____ **Date** _____

Parent 2/Guardian signature _____ **Date** _____

