

Date Received _____

T R '08 _____ T R '07 _____

W-2 '08 _____ W-2 '07 _____

08 Ramah FA _____

08 Other _____

2009 CAMP RAMAH FINANCIAL AID APPLICATION

DUE MARCH 2, 2009

No application will be considered without
COMPLETE Income Tax documents.

Please mail a copy for the records below and mail the complete packet by **March 2, 2009**

- Tax Return 2008
- Tax Return 2007
- W-2 or 1099 forms 2008
- W-2 or 1099 forms 2007

I. YOUR FAMILY

Camper's Name(s):	Grade (Fall '09)	M/F	Session(s) (Check [✓] All That Apply)				For Office Use <u>Only</u>
			Ses 1	Ses 2	Geshher (a/b/c/d/e)	Tikvah 1/2/E/E2	<u>Fees</u>
1.							
2.							
3.							

Has applicant or any member of your family attended Camp Ramah in California before? YES NO
List names and years: _____

Parents Are: Married Separated* Divorced* Single (never married) Widowed
Camper Lives With: Both Parents/Guardians Mother/ Guardian 1 Father/ Guardian 2 Other _____
***BOTH PARTIES MUST COMPLETE SEPARATE FINANCIAL AID APPLICATIONS.**

Parent/Guardian 1:

Name _____
Street _____
City, State, Zip _____
Phone _____
Employer _____
Position _____ Phone _____
Email _____

Self Employed Y N Years w/ Employer _____
If Unemployed, Date Unemployed _____
Gross Salary Before Unemployed _____
Former Profession _____

To what synagogue do you belong? _____ City: _____

Affiliation: Reform Conservative Orthodox Reconstructionist Unaffiliated Other

Parent/Guardian 2:

Name _____
Street _____
City, State, Zip _____
Phone _____
Employer _____
Position _____ Phone _____
Email _____

Self Employed Y N Years w/ Employer _____
If Unemployed, Date Unemployed _____
Gross Salary Before Unemployed _____
Former Profession _____

To what synagogue do you belong? _____ City: _____

II. YOUR FINANCIAL AID REQUEST

How did you hear about this scholarship? Newspaper Ad Camp Friend Synagogue Other: _____

Have you received financial aid from **CAMP RAMAH** in the past? YES NO

From what other sources are you seeking financial aid for Ramah this summer? Please contact as many sources as possible.

Organization (Please list all sources)	Phone	Contact	Amount Expected

How do you plan to cover the cost of camp?

- a. **Total Ramah Tuition** (total tuition charges for all children)
- b. Family can afford (Scholarships are based on the expectation that families contribute)
- c. Synagogue subsidy
- d. **Total lines b through c:**

a. \$	
b. \$	
c. \$	
d. \$	
Financial aid request from Camp Ramah? (subtract line d. from line a.)	\$

III. FAMILY ASSET & LIABILITY INFORMATION

1. Statement of Total Cash (attach additional sheet, if needed)

Type of Account	Present Balance
A. Checking	\$
B. Savings/ CD's	\$
C. Trust Parent's/Family's <input type="checkbox"/> Child's <input type="checkbox"/>	\$
D. Total stocks, bonds & mutual funds	\$
D. Other	\$
Total	\$

2. Statement of Personal Residence and other Real Estate (attach additional sheet, if needed)

Type	Year Acquired	Original Cost	Current Value	Loan Balance	Monthly Payment
A. Personal Home (1 st)		\$	\$	\$	\$
B. Personal Home (2 nd Mortgage)		\$	\$	\$	\$
C. Second Home/Timeshare		\$	\$	\$	\$
D. Investment Property		\$	\$	\$	\$
Total				\$	\$

3. Statement of Retirement Funds (attach additional sheet, if needed)

Type	Original Value	Current Value
Total Pension Plan	\$	\$
Total IRA Account (401k, 403b...)	\$	\$

4. Statement of Automobiles, Trucks, and other Vehicles

Year	Own/ Lease	Make & Model	Original Cost	Current Value (Est.)	Loan Balance	Monthly Payment
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
Total					\$	\$

5. Statement of Personal Loans/Credit Card Debts Medical and Other Liabilities (attach additional sheet, if needed)

Creditor's Name	Type of Obligation	Current Balance	Monthly Payment
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Total		\$	\$

6. Statement of 2009 School Tuition (if applicable, entire family, attach additional sheet, if needed)

Child's Name	Relationship to applicant	School name	Grade Level	Full Tuition Amount	Room & Board (if not included)	Financial Aid	Parent(s) Monthly Payment
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
				\$	\$	\$	\$
Total				\$	\$	\$	\$

V. OTHER INFORMATION

If your annual expenses (IV.B) are greater than your annual income (IV.A), please explain how your family will make up the difference this year.

Do you see your financial circumstances changing in any way during the coming year? Please explain. If you are currently unemployed, please let us know when you plan to return to work. (Please continue on a separate page as necessary.)

Describe in detail the need or special circumstances that make your application necessary this year? Please provide us with any information that might help us evaluate your request. (Please continue on a separate page as necessary.)

We certify that the information provided herein is true and correct. We understand that any falsification of information provided in this application and attachments will terminate financial assistance retroactively, obligating me to repay Ramah the full dollar amount allocated to the family. We further agree, as a condition to receiving any financial aid, to inform Ramah of any changes in the family's financial situation that may occur during the next year.

**No application will be considered without
COMPLETE 2008 and 2007 Income Tax documents!**

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PARENT/GUARDIAN NAME (Print) _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

(Two Signatures are required for two parent/guardian households)

PARENT/GUARDIAN NAME (Print) _____

Please note: the application deadline is March 2, 2009 (for campers enrolled on or before March 3).

Incomplete applications WILL NOT be considered.

(Applications from late enrollees will be reviewed as space and funds permit.)