PSAS

PRIVATE SCHOOL AID SERVICE

PARENT LAST NAME ______

Camper Aid Form

Summer 2012

CAPITAL CAMPS & RETREAT CENTER

Partner Agency of The Jewish Federation OF GREATER WASHINGTON

JIM JOSEPH FOUNDATION Shimon ben Joseph

THE ASSOCIATED and our agencies Proud supporters of Jewish camping

STUDENT LAST NAME ______

Please refer to the instructions attached to the Camper Aid Form (CAF) for assistance completing the application. If you need additional assistance, please contact our helpdesk at (866) 424-6443.

THIS FORM MUST BE RECEIVED WITHIN 14 DAYS OF CAMP REGISTRATION

Mail to: PRIVATE SCHOOL AID SERVICE, P.O. BOX 458025, WESTLAKE, OHIO 44145-8025

TO COMPLETE THIS APPLICATION YOU WILL NEED TO INCLUDE:

Please note the required tax year documentation.

1. Detailed copies of all pages and Schedules of your **2010** Federal Income Tax Return Form 1040, 1040A, or 1040EZ **(as filed with the IRS)** for individuals listed in Sections A and B. Recaps and/or Summary Forms are not acceptable. If you file Schedule A, C, E or F, you must provide copies. If you file Schedule E with your tax return for a Partnership or S Corporation, you must provide copies of your Schedule K-1. If you have not yet filed, or are not required to file a tax return, see the REQUIRED DOCUMENTATION section of the INSTRUCTIONS.
2. Copies of all **2010** W-2 Wage and Tax Statement Forms, all **2010** 1099/1099R for Interest/Dividends, Pensions/Annuities and/or Misc. Income Forms for individuals listed in Sections A and B **(Please make sure all documentation is copied on regular 8 ½ x 11 paper)**.
3. Documentation of TOTAL AMOUNTS received in **2010** for all Non-Taxable Income (see Section G for specific requirements).
4. This application form filled out in its entirety, signed and dated by the Parent(s) or Guardian(s) listed in Sections A and B.

IMPORTANT: If the above items do not accompany this application, your application will not be considered complete.

Keep a copy of this completed application for your records.

To check the processing status of your application, go to www.psas.org.

Camper Aid Form • 2012

Print Form | Clear Form

Print clearly and neatly with a ball point pen •

A PARENT, GUARDIAN or OTHER ADULT RESPONSIBLE FOR TUITION

Check one: ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Other Adult

Last Name ______ First Name ______ MI ______

Social Security Number ______ Age ______ (Area Code) Home Phone (______) ______

Address ______ Apt. # ______

City ______ State ______ Zip ______

(Area Code) Work Phone (______) ______ E-mail address ______

Employed by ______ How Long? ______ Occupation/Title ______

Pay Rate $ ______ hourly $ ______ annually

☐ If you are self-employed, check this box and refer to Section K of this form.

May PSAS contact you at work if there are questions? ☐ Yes ☐ No

B PARENT, GUARDIAN or OTHER ADULT RESIDING WITH PARENT A

Check one: ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Other Adult

Last Name ______ First Name ______ MI ______

Social Security Number ______ Age ______ (Area Code) Home Phone (______) ______

Address ______ Apt. # ______

City ______ State ______ Zip ______

(Area Code) Work Phone (______) ______ E-mail address ______

Employed by ______ How Long? ______ Occupation/Title ______

Pay Rate $ ______ hourly $ ______ annually

☐ If you are self-employed, check this box and refer to Section K of this form.

May PSAS contact you at work if there are questions? ☐ Yes ☐ No

C HOUSEHOLD INFORMATION

1. Number of individuals who will reside in my/our household during the summer of 2012:

Parents/Guardians ______ Children ______ Other* ______

*If **Other**, please explain relationship to Parent ______

2. **Current marital status/housing arrangement of Parent/Guardian A:**

a. ☐ Single, never Married* d. ☐ Divorced* g. ☐ Residing w/Significant Other
b. ☐ Married e. ☐ Remarried* h. ☐ Other: ______
c. ☐ Widowed f. ☐ Separated* ______

*If **Divorced**, **Remarried**, **Separated or Single**, please complete **Section D**.

D DIVORCED, SEPARATED OR SINGLE PARENTS (TO BE COMPLETED BY PARENT OR GUARDIAN LISTED IN SECTION A)

1. Date of separation (Month/Year) ______
2. Date of divorce (Month/Year) ______
3. Non-custodial parent ______
   Last Name First Name MI
4. Do you receive or pay child support? ☐ Receive $______ per year ☐ Pay $______ per year ☐ Neither
5. Who will claim the student as a tax dependent in **2011**? ______
6. Who is responsible for the tuition for the dependent(s) listed in Section E*?

☐ Father ______% Name ______

☐ Mother ______% Name ______

☐ Other ______% Name ______

*If tuition is shared, each responsible party must complete a Camper Aid Form (CAF).

Scholarship money is available through the generosity of our communities, including members of the CCRC family. We encourage families to also apply for other monies that may be available in their community, such as synagogues and other local agencies.

Will you be applying for grants (including incentive, non-need based grants) or receiving aid from other sources (including community agencies, synagogue or family)? ☐ Yes ☐ No

If yes, list from where and amounts ______ $______

CCRC reserves the right to modify scholarship awards upon additional information disclosed, monies received that are not reported in this application, or changes in a family's circumstances.

CCRC respects the delicate nature of information provided by families. On occasion, funding foundations request that we provide distribution data for reporting purposes only. We do this with their assurance it is treated in the strictest of confidence.

Any known misrepresentation will exclude this application from further consideration.

I/we will inform CCRC immediately of any change in financial circumstance.

Any funds not disclosed in this application and later received by CCRC for the camper will be considered as part of the aid provided by CCRC.

Keep a copy of this completed application for your records.

E DEPENDENTS *(DO NOT LEAVE BLANK)*

Number of dependent children who will attend a tuition charging program: daycare, Pre-K, elementary school, secondary school, college, or camp in 2012? ____________________

List ALL dependent children residing in your household in order of oldest to youngest, their school grade and CCRC camp session they are applying to. List the name of the schools they attend and if applicable, fees and financial aid information requested. If your dependent children will be enrolled in any other summer program for summer 2012, list the names of the program(s) and answer all information requested. Incomplete applications will not be processed.

*Required for Processing

1	Dependent Last Name	Dependent First Name	MI	Age	School grade in Fall 2012	Camp Session Preferred	*Amount I/We feel we can pay toward CCRC Fees $
Name of Daycare, School, or College		Full Year's Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $
Name(s) of summer camps/programs child will attend, in addition to Capital Camps:							OFFICE USE ONLY
Overnight Camp? ☐ Y or N ☐	Length of Program	Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $

2	Dependent Last Name	Dependent First Name	MI	Age	School grade in Fall 2012	Camp Session Preferred	*Amount I/We feel we can pay toward CCRC Fees $
Name of Daycare, School, or College		Full Year's Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $
Name(s) of summer camps/programs child will attend, in addition to Capital Camps:							OFFICE USE ONLY
Overnight Camp? ☐ Y or N ☐	Length of Program	Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $

3	Dependent Last Name	Dependent First Name	MI	Age	School grade in Fall 2012	Camp Session Preferred	*Amount I/We feel we can pay toward CCRC Fees $
Name of Daycare, School, or College		Full Year's Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $
Name(s) of summer camps/programs child will attend, in addition to Capital Camps:							OFFICE USE ONLY
Overnight Camp? ☐ Y or N ☐	Length of Program	Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $

4	Dependent Last Name	Dependent First Name	MI	Age	School grade in Fall 2012	Camp Session Preferred	*Amount I/We feel we can pay toward CCRC Fees $
Name of Daycare, School, or College		Full Year's Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $
Name(s) of summer camps/programs child will attend, in addition to Capital Camps:							OFFICE USE ONLY
Overnight Camp? ☐ Y or N ☐	Length of Program	Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $

5	Dependent Last Name	Dependent First Name	MI	Age	School grade in Fall 2012	Camp Session Preferred	*Amount I/We feel we can pay toward CCRC Fees $
Name of Daycare, School, or College		Full Year's Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $
Name(s) of summer camps/programs child will attend, in addition to Capital Camps:							OFFICE USE ONLY
Overnight Camp? ☐ Y or N ☐	Length of Program	Tuition and Fees $	Applying for Aid? ☐ Y or N ☐	Amount of Aid Received $	Amount Paid By Applicants $		Amount Paid By Others $

☐ **Please check if additional campers are listed on a separate sheet.**

Keep a copy of this completed application for your records.

F TAXABLE INCOME

The **2010** federal tax return for student's household was:

- ☐ Filed
- ☐ Not filed yet (See **Required Documentation** section)
- ☐ I/we do not file. I/we only receive non-taxable income

	Actual 2010	Estimate 2011
1. Total number of exemptions claimed on Federal Income Tax form:		
2. Parent/Guardian A total taxable income from W-2 wages. (Total income for Parent A only)	$ ______	$ ______
3. Parent/Guardian B total taxable income from W-2 wages. (Total income for Parent B only)	$ ______	$ ______
4. Net business income* from self-employment, farm, rentals, and other businesses. (*Go to Section K) (Attach Schedules C, E, and/or F from your IRS 1040) **See 2010 1040 lines 12, 17, and 18**	$ ______	$ ______
5. Other non-work taxable income from interest, dividends, alimony, unemployment, and non-business income. **See 2010 1040 lines 8a, 9a-11, 13, 14, 15b, 16b, 19-21** **See 2010 1040A lines 8a-14b**	$ ______	$ ______
6. Allowable "Adjustments to Income" as reported on you IRS 1040, 1040A, or 1040EZ. **See 2010 1040 line 36 or 1040A line 20**	$ ______	$ ______
7. Total "Adjusted Gross Income" as reported on your IRS 1040, 1040A, or 1040EZ **See 2010 1040 line 37 or 1040A line 21**	$ ______	$ ______
8. Total Tax Paid as reported on your IRS 1040, 1040A or 1040EZ. **See 2010 1040 line 60 or 1040A line 37**	$ ______	$ ______
9. Medical/Dental expenses as reported on Schedule A line 1 of your IRS 1040 Form.	$ ______	$ ______

G NON-TAXABLE INCOME

List the **total amount** received from **1/1/10-12/31/10** for all recipients in household.

DO NOT list monthly amounts.

10. Child support $ ______ per year
11. **Cash Assistance (TANF) $ ______ per year***
12. **Food Stamps $ ______ per year***
    a. **Medicaid received in 2010? ☐ Yes ☐ No**
13. **Social Security income (SSA/SSD, etc.)**
    (Provide documentation for all recipients in household.) $ ______ per year*
    a. **Social Security income (SSI ONLY)**
    total received in 2010 $ ______*
    (Provide documentation for all recipients in household.)
14. **Student loans and/or grants received for PARENT's education.**
    (Not college attending dependents or students listed in Section E.)
    a. **total received in 2010 $ ______***
    b. **total used for household expenses $ ______ per year***
15. **Housing Assistance (Sec. 8, HUD, etc.) $ ______ per year***
    a. **Religious Housing Assistance**
    total received in 2010 $ ______*
    (parsonage, manse, etc.)
16. **Other non-taxable income (Workers' Comp., Disability, Pension/Retirement, etc. Identify source(s) in Section L) $ ______ per year***
17. Loans/Gifts from friends or relatives $ ______ per year
18. Personal Savings/Investment Accounts used for household expenses (Do not include totals listed in Section I) $ ______ per year
19. **Total non-taxable income for 2010 $ ______ per year**

Monies received from rental, investment, or OTHER partnership and business ventures?

total received in **2010** $ ______

***You must provide 2010 YEAR-END documentation for items 11-16; either a YEAR-END statement from the appropriate Public Agency, or documentation showing totals from 1/1/10 - 12/31/10.**

H HOUSING INFORMATION (DO NOT LEAVE BLANK)

20. Do you rent or own your residence? ☐ Rent ☐ Own (go to line 22)
21. If renting, what is the monthly rental payment? $ ______
    a. Amount paid by household $ ______ per month
    b. Amount paid by other source(s) $ ______ per month
22. If you own your residence:
    a. What is the current market value? $ ______
    b. What is the amount still owed, including home equity loans? $ ______
    c. What is the monthly mortgage payment? $ ______ per month
    d. Year home was purchased? ______

I ASSETS & INVESTMENTS (CURRENT VALUES)

23. Total amount in cash, checking, and savings accounts $ ______
24. Total value of money market funds, mutual funds, stocks, bonds, CDs, or other securities $ ______
25. Total value of IRA, Keogh, 401K, SEP or other retirement accounts $ ______
26. If you own real estate other than your primary residence,
    a. What is the fair market value? $ ______
    b. What is the amount still owed? $ ______
27. Do you own a business? ☐ Yes ☐ No
    If **Yes**, please go to **Section K.**
    a. What is the fair market value of your business? $ ______
    b. What is the amount still owed? $ ______
28. Do you or any of the dependent children have a trust fund or Section 529 plan? ☐ Yes ☐ No
    If **Yes**, list value $ ______
29. Do you own a farm? ☐ Yes ☐ No
    If **Yes**, please go to **Section K.**
    a. What is the fair market value of your farm? $ ______
    b. What is the amount still owed? $ ______
30. What is/are the make, model, year, value and payment amount of your automobile(s)?

	Make	Model	Year	Value	Payment Amount	Year Purchased
a.				$	$	
b.				$	$	
c.				$	$	

31. What is the current amount of your credit card debt? $ ______

J UNUSUAL CIRCUMSTANCES

Check all that apply to your situation within the past 12 months:

- a. ☐ Loss of job
- b. ☐ Recent separation/divorce
- c. ☐ Change in family living status
- d. ☐ Change in work status
- e. ☐ Bankruptcy
- f. ☐ College expenses
- g. ☐ Income reduction
- h. ☐ Illness or injury
- i. ☐ Death in the family
- j. ☐ Shared custody
- k. ☐ High debt
- l. ☐ Child support reduction
- m. ☐ Medical/Dental expenses
- n. ☐ Shared tuition
- o. ☐ Other (Explain in Section L)

Parent/Guardian A: ______________________ SS# ______________________

Print Name

K BUSINESS INCOME ESTIMATE (**2010** TOTALS)

*(If you have not filed your **2010** Tax Return, and are Self-Employed, Own a Business, Rental Property and/or Farm* **DO NOT LEAVE BLANK***)*

	Schedule C	Schedule E	Schedule F
1. What is your total estimated GROSS business taxable income?	$____________	$____________	$____________
2. What is your total NET business taxable income/loss? (DO NOT LEAVE BLANK)	**$____________**	**$____________**	**$____________**

3. If your business pays your home rent or mortgage, what is the annual total? $______________________
4. If your business pays for your personal automobile, what is the annual total? $______________________
5. If your business pays any portion of other personal expenses, list total amount and explain in SECTION L. $______________________
6. If you own rental property: What was the total amount of Rental Income received? $______________________

L EXPLANATIONS *(USE THIS SPACE TO EXPLAIN ANY ANSWERS WHICH MAY NEED CLARIFICATION)*

M CERTIFICATION, AUTHORIZATION AND DOCUMENTATION CHECKLIST

WHAT IS NEEDED TO PROCESS THIS APPLICATION

(IF ANY OF THE FOLLOWING IS MISSING, YOUR APPLICATION WILL NOT BE CONSIDERED COMPLETE)

1. This application form filled out in its entirety, *SIGNED AND DATED BELOW* by the Parent or Guardian listed in Sections A and B.

2.

IF YOU HAVE FILED A 2010 IRS FORM 1040:	IF YOU HAVE NOT YET FILED A 2010 IRS FORM 1040:	IF YOU DO NOT FILE AN IRS FORM 1040 AND RECEIVE ONLY NON-TAXABLE INCOME:
A complete photocopy of your **2010** Form 1040, 1040A, or 1040EZ (as filed with the IRS, including all Schedules). **2010** W-2 Forms, **2010** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s).	A complete photocopy of your most recent Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules). **2010** W-2 Forms, **2010** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s). ***If this application is submitted after April 15, 2011, you must provide a copy of the 2010 Extension for Filing Request, as approved by the IRS and a copy of your last filed tax return.***	Photocopies of your **2010** YEAR-END Social Services statement (TANF, etc.), Food Stamp documentation, Housing Assistance documentation, Student Loans and/or grant documentation for parent's education, Social Security income statements showing **TOTAL AMOUNT** received in **2010** for **ALL** members of the household.

SIGN HERE

I/we declare that the information on this form is true, correct, and complete to the best of our knowledge. I/we authorize PRIVATE SCHOOL AID SERVICE to return this form and all attachments only to the schools and agencies named in Section E under contract with PSAS.

Parent/Guardian A ______________________ **Date** __________ **Parent/Guardian B** ______________________ **Date** __________

This Camper Aid Form (CAF), all attachments and an analysis of your CAF are sent only to the school(s) or agencies contracting with PSAS.
You will not receive results from PSAS. No other agency will see or receive any information about this application or its attachments.

Mail to: PRIVATE SCHOOL AID SERVICE, P.O. BOX 458025, WESTLAKE, OHIO 44145-8025

Questions? Call: (440) 892-4272

INTRODUCTION

PRIVATE SCHOOL AID SERVICE (PSAS) is under contract with the program, school system, or organization from which you obtained this application for tuition assistance. Our purpose is to provide a reasonable assessment of the ability of each family to pay for the education of their children at private and independent elementary and secondary schools or other programs.

Your Camper Aid Form, all attachments, and an analysis of your CAF are sent **only** to the program(s) or agencies contracting with PSAS. ***No other agency will receive any information about this application or its attachments.***

PRIVATE SCHOOL AID SERVICE does not make any decisions about recipients and amounts of financial aid awarded. Recipients and amounts of aid are determined by the designated program or agency. **YOU WILL NOT RECEIVE RESULTS FROM PRIVATE SCHOOL AID SERVICE.**

INSTRUCTIONS

A & B PARENT, GUARDIAN OR OTHER ADULT

This form should be filled out by the parent, guardian or other adult responsible for the tuition of the child or children attending a private or independent program contracting with PSAS. If the parents/guardians are divorced or separated, only the parent responsible for the tuition and any other adult residing in the household should fill out the form. If tuition is shared, each responsible party must complete a Camper Aid Form (CAF) if financial aid is needed.

Answer *all questions* for both parent(s), stepparent(s), or guardian(s) responsible for tuition for the dependent(s) listed in Section E. **Do not leave any questions blank.** If natural parents are divorced, separated or single, answer all questions in Section D. If natural parents are divorced/separated and remarried, list information for custodial parent and new spouse. If either parent answers "self-employed," and has not filed a tax return, complete Section K.

CALCULATIONS ARE BASED ON TOTAL HOUSEHOLD INCOME.

C HOUSEHOLD INFORMATION

ITEM 1: Enter total number of individuals living in household. Include any college students claimed on the tax return. Do not include children who have moved out of the home. Include all family members dependent on and residing with parent listed in Section A.

ITEM 2: Check the appropriate box indicating custodial parents' marital status. If parents are divorced, separated or single, complete Section D.

D DIVORCED, SEPARATED OR SINGLE PARENTS

If dependent(s) parents are divorced or separated, or do not reside in the same household, the custodial parent must provide the information requested in Section D about the non-custodial parent.

If the date of separation took place in the year 2010, PSAS will require copies of any tax returns filed jointly or independently by both parent(s)/guardian(s) for 2010. Be sure to estimate the income of both parents in Section F for 2011.

ITEM 4: List the total amount of child support actually received by custodial parents listed in Sections A & B. If total received differs from court ordered amount, list only the total received.

ITEM 5: Indicate who will claim the student as a tax dependent in 2011.

ITEM 6: Indicate who is responsible for tuition and what percentage for the dependents listed in Section E.

E STUDENT INFORMATION

List all dependent children residing in your household in order of oldest to youngest. List the grade in fall of 2012, child's age, CCRC camp session preferred, amount of scholarship requested, name of Daycare, School, or College, full year's tuition and fees charged. Indicate whether or not you applied for aid, and if received, amount of aid received, the balance paid by applicants and/or other sources. Name(s) of summer camps and summer programs chid(ren) will attend, in addition to Capital Camps, whether or not it is an overnight camp, length of the program, full tuition and fees charged. Indicate whether or not you applied for aid, and if received, amount of aid received, the balance paid by applicants and/or other sources.

NOTE: The information regarding tuition charged per student assists PSAS in making the most equitable analysis of your ability to pay for private programs. If you are unsure, please estimate.

F TAXABLE INCOME

List all actual amounts for **2010** and estimated amounts for **2011**.

ITEM 1: Enter the total number of exemptions you claimed on your **2010** IRS Form 1040, 1040A, or 1040EZ.

ITEM 2: Enter the total **2010** taxable income earned in wages, salaries and tips for parent/guardian/other listed in SECTION A. Attach all copies of **2010** W-2 forms and/or **2010** 1099 forms from all employers.

ITEM 3: Enter the total **2010** taxable income earned in wages, salaries and tips for parent/guardian/other listed in SECTION B. Attach all copies of **2010** W-2 forms and/or **2010** 1099 forms from all employers.

ITEM 4: Enter the total net income from business (attach Schedule C or C-EZ), all rents, royalties, partnerships (attach Schedule E and Schedule K-1 if applicable), and all farm income or loss (attach Schedule F). If you have received income from any of these sources and are estimating your income for **2010**, you must also fill out Section K of this application. *(See **2010** 1040 lines 12, 17 and 18, enter sum total.)*

ITEM 5: Enter the total of all other taxable income from interest, dividend income (attach Schedule B if over $400), taxable refunds, credits or offsets of state and local income taxes, alimony received, capital gain or loss (attach Schedule D). List all capital gain distributions not previously reported, total IRA distributions (if rolled-over, explain in Section L), pensions and annuities, unemployment compensation, taxable social security benefits, and any other taxable income. **Attach copies of all Form 1099/1099R, and/or Form 1098 for Interest/Dividends, Pensions/Annuities or other misc. income. Attach copies of Social Security Income statements and Unemployment Compensation documentation for year-end 2010.** *(See **2010** 1040 lines 8a, 9a-11, 13, 14, 15b, 16b, 19-21 or 1040A lines 8a-14b, enter sum total.)*

ITEM 6: Enter allowable adjustments to income, such as IRA payments, self-employment tax, self-employed health insurance deduction, Keogh retirement plan and self-employed SEP deductions, penalty on early savings withdrawals, and alimony paid. Add together to arrive at your total adjustments. DO NOT include your standard deduction or deduction amounts for each family member. *(See **2010** 1040 line 36 or 1040A line 20.)*

ITEM 7: Enter total adjusted gross income as reported on your IRS Form 1040, 1040A or 1040EZ. Attach all pages of the applicable tax form (1040, 1040A, 1040EZ) for documentation. *(See **2010** 1040 line 37 or 1040A line 21.)*

ITEM 8: Enter the Total Tax paid (not withheld) as reported on your IRS Form 1040, 1040A, or 1040EZ. *(See **2010** 1040 line 60 or 1040A line 37.)*

ITEM 9: Enter the total of any medical and dental expenses reported on Schedule A line 1 of your IRS Form 1040 (attach Schedule A).

Keep a copy of this completed application for your records.

G NON-TAXABLE INCOME

If you receive non-taxable income, **you must list and provide documentation of the TOTAL YEARLY AMOUNTS received in 2010** for all recipients in the household for the following: Cash Assistance (TANF), Food Stamps, Social Security income, Student loans and/or grants (received for PARENT's education), Housing assistance (Section 8, HUD, etc.), Worker's Compensation, Disability or Retirement.

ITEM 10: Child support: Report total amount received for **2010** for all children in the household.

ITEM 11: Cash Assistance (TANF): Report total amount received for **2010**.

ITEM 12: Food Stamps: Report total amount received for **2010**. Do not combine with TANF or Medicaid.

ITEM 12a: Did you receive Medicaid in **2010**?

ITEM 13: Social Security benefits: Report the total non-taxable (**SSA/SSD, etc**) amount received in **2010** for all recipients in household.

ITEM 13a: Social Security benefits: Report the total non-taxable (**SSI ONLY**) amount received in **2010** for all recipients in household.

ITEM 14: Student loans and/or grants: Report the total amount received in **2010** for **PARENT'S** education. Do not list loans, grants or scholarships received for dependents in Section E. Identify how much of this income was used for household expenses in **2010**.

ITEM 15: Housing assistance: Report the total amount received for **2010**. Identify in Section L all sources of Housing assistance (government assistance, Section 8, HUD, family/friends or other sources), including monies received toward rental/mortgage payments and/or utilities.

ITEM 15a: Religious Housing assistance: Report the total amount received for **2010**.

ITEM 16: Other non-taxable income: Report all additional non-taxable income received in **2010** including: Deductible IRA or Keogh payments; untaxed portions of pensions; tax exempt interest income; foreign income exclusion; Workers' Compensation; veterans non-education benefits (Death Pension, Dependency and Indemnity Compensation, etc.); food and other living allowances paid to members of the military, clergy or others; cash support or any money paid on your behalf, including support from a non-custodial parent or any other person (do not include court ordered support here); or any other untaxed benefit or income not subject to taxation by any government (Refugee Assistance, VA Educational Work-Study, etc.). Identify source(s) in Section L.

ITEM 17: Loans/Gifts received from friends or relatives: Report the total amount received in **2010**.

ITEM 18: Personal Savings/Investment Accounts: Report the total amount used in **2010** for household expenses.

ITEM 19: Total non-taxable income for 2010: Add together Items 10-18.

List monies received from rental, investment, or OTHER partnership and business ventures.

H HOUSING INFORMATION

ITEMS 20 and 21: If you rent your home or apartment, list your monthly rental or lease payment here, including amounts paid by household and other sources.

ITEM 22a: Determine the present value of the family home and list it. Local real estate agents should be able to help you if you are unsure.

ITEM 22b: Check with your lending institution and enter the amount still owed, including second mortgages.

ITEM 22c: List your monthly mortgage payment.

ITEM 22d: List the year that your home was purchased.

I ASSETS AND INVESTMENTS

ITEM 23: List total of current balances in cash, savings, and checking accounts. Do not include IRAs or Keoghs.

ITEM 24: List total current market value of money market funds, mutual funds, stocks, bonds, CDs or other securities.

ITEM 25: List total current market value of all retirement funds, including IRA, Keogh, 401K, and SEP plans or other retirement accounts.

ITEM 26: Answer Items 26a and 26b for any and all investment real estate (not including the family's primary residence), if applicable. Second homes, rental properties, and land contracts should be included.

ITEM 27: If you own a business, check the Yes box and answer Items 27a and 27b. If you have not filed your **2010** tax return, complete Section K of this application.

ITEM 28: Indicate if you or anyone in the household has a trust fund, and if so, list the value.

ITEM 29: If you own a farm, check the Yes box and answer Items 29a and 29b. If you have not filed your **2010** tax return, complete Section K of this application

ITEM 30: List the make, model, year, value, payment amount, and year purchased of your automobile(s).

ITEM 31: List the current amount of your credit card debt.

J UNUSUAL CIRCUMSTANCES

Check any and all items that apply to your situation. If your circumstances require explanation beyond the scope of this application, please notify the program to which you are applying. Do not include a letter of explanation with this application.

K BUSINESS INCOME

Provide 2010 Business Income Estimates if you have not filed your 2010 Tax Return.

ITEM 1: List estimated total GROSS taxable business income for **2010**.

ITEM 2: List estimated total NET taxable business income/loss for **2010**.

ITEM 3: List the total amount paid by business in **2010** for home rent or mortgage.

ITEM 4: List the total amount paid by business in **2010** for personal automobile.

ITEM 5: List the total amount of personal expenses paid by business in **2010** that do not fall into one of the categories above.

ITEM 6: List total amount of estimated rental income received in **2010**.

If providing income estimates for more than one business, corporation or farm (Schedule C, Schedule E and/or Schedule F) please list information for each business, corporation or farm separately. Use additional sheet or Section L, if necessary.

L EXPLANATION

If any specific question requires clarification, write a brief explanation in this space. If your circumstances require explanation beyond the scope of this application, please notify the program to which you are applying.

M PARENTS' CERTIFICATION, AUTHORIZATION, AND DOCUMENTATION CHECKLIST

You **must** sign the form in this section. Your signature authorizes PSAS to release the form and attachments to the contracting programs indicated in Section E. By signing the form, you also certify that the information submitted is correct. This application CANNOT be processed without the appropriate signature(s) and the appropriate documentation.

REQUIRED DOCUMENTATION

If you have filed your 2010 IRS Form 1040:

You must submit photocopies of all pages of your **2010** Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules, and K-1 Forms, **2010** W-2 Forms, **2010** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s). *Do not include your State tax return unless requested.*

If you *have not* filed your 2010 IRS Form 1040:

You must submit photocopies of all **2010** W-2 Forms, **2010** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s), and photocopies of all pages of your **most recent** Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules, and K-1 Forms). ***If this application is submitted after April 15, 2011, you must provide a copy of the 2010 Extension for Filing Request, as approved by the IRS.***

If you are an Independent Contractor or self-employed and *have not* filed your 2010 IRS Form 1040:

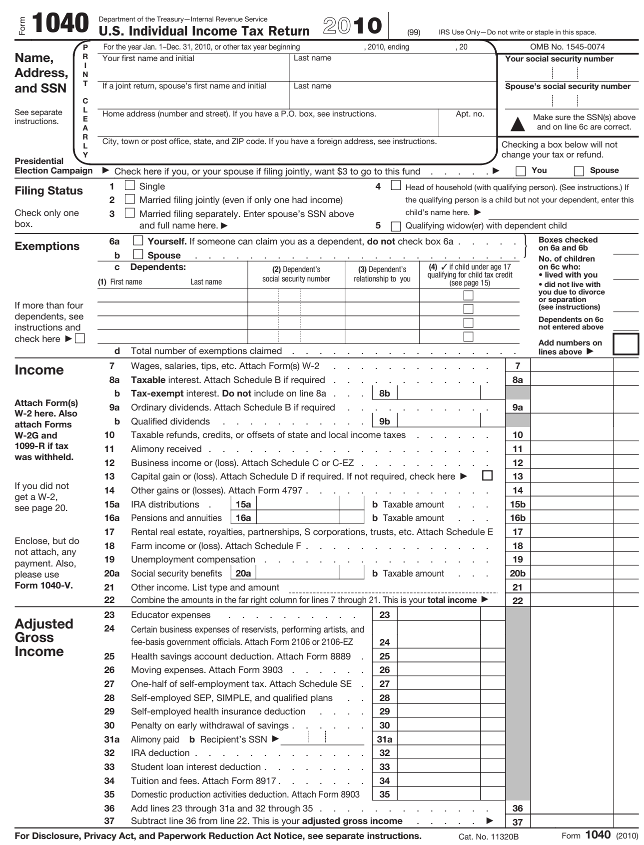
You must complete Section K and submit photocopies of all pages of your most recent Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules, and K-1 Forms), **2010** W-2 Forms, **2010** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s). ***If this application is submitted after April 15, 2011, you must provide a copy of the 2010 Extension for Filing Request, as approved by the IRS.***

If you receive non-taxable income:

You must submit photocopies of your **2010** YEAR-END (01/01/**10** - 12/31/**10**) Cash Assistance documentation (TANF, etc.), Food Stamp documentation, Housing Assistance documentation, Student loan and/or grant documentation (for PARENT's education), Social Security Income statements, showing the **TOTAL AMOUNT** received in **2010** for **ALL** members of the household. If you list any total for line 16, you must identify source(s) in Section L.

ALONG WITH YOUR APPLICATION YOU MUST INCLUDE:

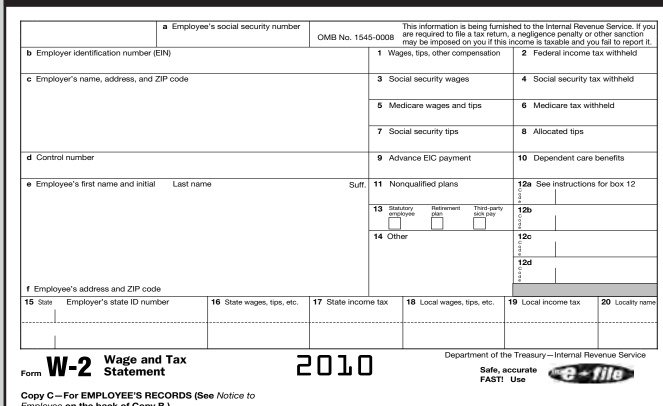
Copies of your 2010 1040, 1040A or 1040EZ form (all pages)



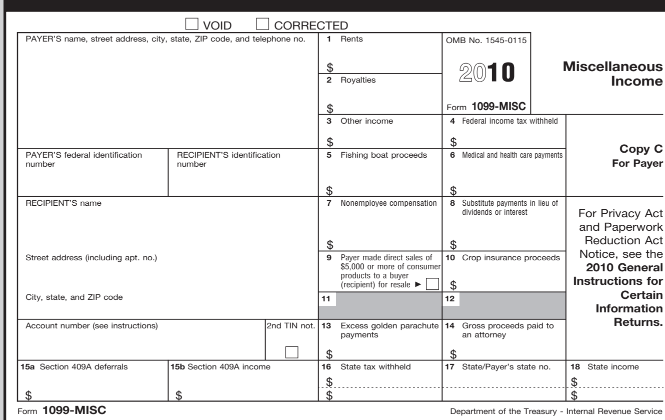
Documentation Checklist

- ☐ Copies of all pages of your 2010 IRS Form 1040, 1040A or 1040EZ including all Schedules.
- ☐ Copies of *all* W-2 and 1099 forms for individuals listed in Sections A and B (All documentation should be copied on regular 8 ½ x 11 paper).
- ☐ A self-addressed stamped postcard or envelope if you require notification that PSAS has received your application (PSAS will not return any documentation).
- ☐ Copies of all required non-taxable income documentation.
- ☐ ***Keep a copy of this completed application for your records.***

Copies of all 2010 W-2 forms FROM ALL EMPLOYERS



Copies of all 2010 1099 forms (where applicable)



If you do not have all of the documentation required:

Contact the IRS for a transcript of your complete 1040, 1040A or 1040EZ, and any Schedules, etc.

Contact your employer for a copy of your W-2. Contact the appropriate company for a copy of your 1099.

AVOIDING THE MOST COMMON ERRORS

THE MOST COMMON ERROR THAT APPLICANTS MAKE IS SENDING THE APPLICATION INCOMPLETE. IN ORDER FOR AN APPLICATION TO BE REVIEWED, IT MUST INCLUDE:

- All pages of your **2010** IRS Form 1040, 1040A, or 1040EZ (federal income tax return). **Do not send your state tax return, recap or tax summary.** (If you have not yet filed your **2010** IRS Form 1040, or you do not file, please see the Required Documentation section of the instructions.)
- **2010** W-2 and/or 1099 forms for individual(s) listed in Sections A and B **(Please make sure all documentation is copied on regular 8 ½ x 11 paper).**
- Non-taxable income verification.

✓ Print clearly and neatly with a black or dark ball point pen.

✓ ***Make a photocopy of your completed Camper Aid Form for your records*****.**

✓ Do not staple ANYTHING to the Camper Aid Form.

✓ Submit the original application only.

✓ Affix proper postage to the envelope (applications without sufficient postage will be returned by the post office).

✓ If you would like to receive notification that PRIVATE SCHOOL AID SERVICE has received your application, enclose a self-addressed stamped postcard or envelope with your application.

✓ Do not send any original documents. Originals will not be returned.

PSAS CANNOT PROCESS YOUR APPLICATION IF YOU HAVE NOT INCLUDED THE REQUIRED DOCUMENTATION.

OTHER COMMON ERRORS

SECTIONS A & B

List the parent, guardian or other adult responsible for tuition and any other adult residing in the household. Complete each section in its entirety, including age, social security number, and name of employer. If you are self-employed, check the box and refer to Section K.

SECTION C

This section should include the total number of parents, children and other individuals residing in the household. Any household member listed as "Other" should be identified, using Section L if necessary for explanation.

SECTION D

This section should be completed by the custodial parent with information about the non-custodial parent.

SECTION E

List all dependent children, including college students, in order of oldest to youngest. *If any dependents will attend a tuition charging program, fill in all columns for those children.*

SECTION F

Answer Items 1–9 for BOTH **2010** and **2011**. *YOU MUST include documentation of all income received by both parents/guardians residing with the applicant(s).* If you are divorced or separated and receive child support, list the yearly amount in Section G Item 10.

SECTION G

List the **YEARLY** amounts received for Items 10-19. *Remember, do not list monthly amounts.*

SECTION H

If you rent your home, list your monthly rental payment, including any payments made by sources other than the household. If you own your home, answer Items 22a, b, c, and d.

SECTION I

Enter the totals for Items 23, 24, 25 and 28 based on your investment, savings, and/or checking statements. If you own rental or investment property, answer Items 26a and 26b. *You must include Schedule E from your IRS Form 1040.*

If you answered "Yes" to Items 27 or 29 and are estimating **2010** income, complete Section K of the application. *You must include Schedule C, E and/or Schedule F from your IRS Form 1040.*

SECTION J

Check boxes for any unusual or relevant circumstances which affect the applicant. If you feel that your circumstances require explanation beyond the scope of this application, please notify the program to which you are applying. Do not include a letter of explanation with this application.

SECTION K *(If estimating **2010** income)*

Answer each question that pertains to your estimated income.

SECTION L

If you feel that any specific question requires clarification and/or an explanation, write a brief summary in the space provided.

SECTION M

Confirm that you have attached ALL REQUIRED DOCUMENTATION and that you have signed the application.