IAUJC SUPPORTS ITHACA JEWISH CAMPERS!

The IAUJC Jewish Camp and Teen Summer Experience Initiative
And the ROBERT AND MARCIA ASCHER ENDOWMENT

CAMP FINANCIAL AWARDS

Application for the Campership Grant from the IAUJC Jewish Camp and Teen Summer Experience Initiative and the Robert and Marcia Ascher Endowment.

The IAUJC’s Jewish camp grant initiative supports young people in attending Jewish overnight camps and teen summer experiences, in order to strengthen their identities, learn new skills, and build friendships that may last a lifetime. We seek also to strengthen the Jewish community in the process.

Our immediate goal is to encourage local young people to partake in Jewish summer programs and to ensure that every child in the Ithaca area who would like to attend a Jewish overnight camp or teen summer experience is able to do so.

IAUJC raises funds from members of the Ithaca Jewish community, and makes the funds available to assist families. This support is available to either a first-time camper or a repeat camper. We are interested in supporting young people ages 6 to 18, and particularly, but not limited to, those with special needs and/or teens between the ages of 13 and 18. Financial awards are made, from a program budget determined annually by the IAUJC’s Board, to each qualified applicant demonstrating need according to camp applications.

Eligibility for camperships will be determined by the participating camp and their recommendation will be presented to the IAUJC Camp Award Committee for its consideration.
Any and all financial assistance awarded by IAUJC will be sent directly to the camp. As IAUJC Award funds are limited, early application is encouraged.

Note: Jewish overnight camp may be expensive. Don’t automatically assume your income doesn’t qualify your family. We want to ensure every Jewish child has the opportunity to experience the magic of Jewish camp. And, no local person will know your financial information. You can share it only with the camp you chose. We understand these conversations may be difficult to start. Let us reassure you that the benefits of Jewish camp for your child and family will far outweigh any initial discomfort in the applying for assistance.

QUESTIONS/COMMENTS? Email: CampAwards@IAUJC.org

Jewish Camp and Teen Summer Experience Award Committee
CHECKLIST OF ELIGIBILITY FOR AWARD FUNDING:

☐ The camper is between 6 - 18 years old.

☐ The camper identifies as Jewish or has at least one Jewish parent.

☐ The camper lives in Tompkins County

*If not, prospective campers living in Cortland, Tioga, or Southern Cayuga Counties should inquire before submitting an application to the IAUJC.*

☐ The camper is registered for a Jewish overnight camp or teen experience. You can find camps at Foundation for Jewish Camp’s website: http://www.jewishcamp.org and/or ask for advice/recommendations from IAUJC Camp Initiative Co-Chairs, Naomi Wilensky at info@tikkunvor.org or Rabbi Suzanne Brody at director@tbeithaca.org.

☐ First time campers have applied for assistance from the One Happy Camper grant program. $1,000 is offered as an encouragement to any child who identifies as a Jew looking for the first time to attend a non-profit Jewish camp for at least 2 weeks. OHC’s grants are not based on need, but the funds are limited and this application should be sent as soon as possible.

☐ The camper's family has already applied for financial assistance from the camp, or are in the process of doing so. If your camp does not have a scholarship program, please note that on this application. *Some camps require large deposits at registration. Call the camp to ask for a waiver or lower deposit if needed. If that is not possible, and you would like to be considered for an IAUJC Camp Award for the camp deposit, please note that on your application and submit to IAUJC as listed below.*

☐ The camper's family has asked for additional financial assistance from family members and synagogue, as applicable.
I. FAMILY INFORMATION

Parent/Guardian #1: ______________________________
Address: _______________________________________
Phone: __________________________
Email: _______________________

Parent/Guardian #2: ______________________________
If different: Address: _______________________________
Phone: __________________________  Email: _______________________
Occupation: ______________________  Employer: ______________________

II. CAMPER or TEEN INFORMATION

Child I:    Name of Camper: ______________________________
Date of Birth: ______________________________
School: ______________________________
Grade in coming fall: __________
Name of Camp: ______________________________
Camp Session Dates: ______________________________
Camp Address: ______________________________
Camp Contact Name, Phone & Email: ______________________________
______________________________
Child 2:  Name of Camper: ________________________________

Date of Birth: _________________________________________

School: _______________________________  Grade ____________

Name of Camp: ___________________________________________________________

Camp Session Dates: _______________________________________________________

Camp Address: ___________________________________________________________

Camp Contact Name, Phone & Email: ________________________________

III. STATEMENT OF INTENT

Parents/Guardians: Identify the reasons for wanting this Jewish Overnight Camp and/or
Teen Summer Experience for your child/ren.

Teens and youth ages 8 and up: Please write a personal statement of the importance of
this experience.

Children under age 8: Please write (or dictate to an adult) or draw a picture on a separate
sheet of paper, explaining the importance of this experience.
IV. ANTICIPATED CAMP EXPENSE AND FUNDING SOURCES

We understand that camp is a large expense. IAUJC wants to help make Jewish summer camp happen. We encourage you to consider funding from different sources, including extended family, if possible.

For each source of support, please indicate whether you have requested or received commitment for funding, and then in the OTHER section, write in the dollar amount requested or committed.

If you are applying for assistance for more than one child, please specify amounts for each camp/child.

*IAUJC campership applicants must apply to camp directly in order to also be considered for this award. First time campers must also apply to One Happy Camper.

*Please ask for what you need. There is no need to inflate your request; we will do our best to meet actual needs.

V. Please tell us of any circumstances or issues that you would like to bring to our attention relevant to this request:
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<tr>
<th><strong>FINANCIAL WORKSHEET</strong></th>
<th>Child 1</th>
<th>Child 2</th>
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<tr>
<td><strong>TOTAL COST OF CAMP</strong></td>
<td>$ _________</td>
<td>$ _________</td>
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<tr>
<td>Immediate Family (your household)</td>
<td>$ _________</td>
<td>$ _________</td>
</tr>
<tr>
<td>Camper's Contribution (job, allowance, etc)</td>
<td>$ _________</td>
<td>$ _________</td>
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<tr>
<td>Extended Family (grandparents, etc)</td>
<td>$ _________</td>
<td>$ _________</td>
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<tr>
<td>Temple / Synagogue / Movement</td>
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*Please check one: ___ Requested  ___ Committed*

*One Happy Camper (first time campers)*

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*Please check one: ___ Requested  ___ Committed*

*Sponsorship directly from the camp*

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*Please check one: ___ Requested  ___ Committed*

**Other Source:**

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*Please check one: ___ Requested  ___ Committed*

**TOTAL requested assistance**

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<th><strong>Committed</strong></th>
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*(from above sources)*

**TOTAL amount of the request to the IAUJC**

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<th><strong>Requested</strong></th>
<th><strong>Committed</strong></th>
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*Note: IAUJC campership applicants must apply to camp directly in order to also be considered for this award. First time campers must also apply to One Happy Camper through PJ Library or the Camp itself. If funds are still available for the coming summer, they are given across the board and NOT based on need!*
**Determination Process and Notice of Award**

The deadline for submission of all application information for the IAUJC grant program is the last day of each month from January through March. All efforts will be made to make notification of awards as quickly as possible. Awards cannot be determined until a request for financial assistance is made to the camp involved and the IAUJC’s application form is completed and the camp responds to IAUJC’s request for information.

The Awards Committee of the IAUJC meets monthly from January to April to review applications on a rolling basis.

The IAUJC Awards Committee will notify the family of the determination of the amount awarded.

Awards will be in the form of a payment made directly to the camp.

**VII. TERMS AND AGREEMENTS**

E-signature or signature below by the parent/guardian(s) is required attesting that all information submitted is true and complete to the best of their knowledge, and that they agree to permit an official of the above mentioned Camp/Teen Experience to discuss with a representative of the IAUJC, the degree of financial assistance required. This information will be held in confidence.

Parents also agree to fill out a post-camp survey about you and your child’s camp experience; and, if appropriate, to facilitate your child’s participation in promoting Jewish summer camp in the Ithaca area, on request.

**Parent/Guardian #1 Signature:**

______________________________

**Date**

**Parent/Guardian #2 Signature:**

______________________________

**Date**