



WELCOME TO ALL

YMCA of Greater Kalamazoo Child Care Scholarship Application

THE ESSENCE OF THE Y

With a commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility, the YMCA of Greater Kalamazoo ensures that every individual has access to the essentials needed to learn, grow and thrive.

EVERYONE IS WELCOME

The YMCA welcomes all who wish to participate and believes that no one should be denied access to the Y based on their ability to pay. Through our scholarship program, the YMCA of Greater Kalamazoo provides assistance to Y families based on individual needs and circumstances. Scholarships reduce fees; they do not eliminate them.

COMMITTED TO OUR COMMUNITY

Determining child care assistance amounts is handled by Child Care Services in a fair and consistent manner. Every YMCA child care participant receives the same benefits, regardless of whether or not they receive a scholarship. YMCA child care participants can feel confident knowing that they are a part of an organization that cares greatly for the well-being of all people, and is committed to youth development, healthy living and social responsibility.

Child Care scholarships will be granted for the duration of the school year or the summer.

Families will need to apply for each session with updated documentation.

Child Care fees are subject to change.

Please contact Child Care Services if you have any questions.

P: (269) 345-9622 E: childcare@kzooymca.org



YMCA Child Care Scholarship Application

1	FAMILY INFORMATION	ALL PERSONS LIVING	G IN THE HOUSEHOLD
Head of Household		Self	DOB
Mailing Address		2nd Adult (if applicable)	DOB
City		Child	DOB
State	Zip Code	Child	DOB
Home Phone		Child	DOB
Cell Phone		Child	DOB
Email:		Other dependent(s)	DOB

3	I AM APPLYING FOR*
√	Check category for which you are applying
	EARLY LEARNING
	SCHOOL AGE
	SUMMER CAMP — MAPLE
	SUMMER CAMP — PORTAGE

*Paperwork for the child care program must be submitted with the scholarship application.

FOR OFFICE USE ONLY

Date Received______
Staff Received_____
APPROVED: YES____ NO___
Scholarship____%
Staff Name_____
Date _____
Date applicant notified

TO APPLY FOR A SCHOLARSHIP, PROVIDE ALL

YEARLY DOCUMENTATION

Federal Tax Forms

♦ 1040 Federal Tax Form



MONTHLY DOCUMENTATION

Documents showing most recent 30 days of income

- ♦ Current pay stubs
- ♦ Social Security/Pension
- ♦ Child support, alimony
- ♦ Food, housing, medical assistance
- ♦ Unemployment

Child Care Scholarship Application Must Be Renewed Every 12 Months

I certify that the above information is true and complete to the best of my knowledge, and that I do not have additional income not represented above. I agree, if necessary, to send additional information and documentation to support above statements. I understand that scholarships are based on need. In the event that I or my child(ren) are no longer using the YMCA or my income level changes, I will contact the YMCA immediately so scholarships can be provided to others. I understand that if I falsify any of the above information, I will not be eligible for assistance now or in the future.



Signature of person completing this form.

Date

Attach all applicable financial documents and turn in to YMCA Child Care Services Department. Assistance will be granted on the basis of financial need within the available resources of the YMCA. The YMCA reserves the right to refuse assistance to any applicant.

TELL US MORE....Use this space to include any additional information or extenuating circumstances that were not included on this application. If you need more space, attach an additional sheet of paper.