



Riverdale YM-YWHA

Fred and Anna Landau Bldg. / 5625 Arlington Avenue / Bronx, New York 10471
(718) 548-8200 / Fax (718) 796-6339 / www.RiverdaleY.org

Sara Crowe
President

Deann Forman
Chief Executive Officer

Dear Friend,

Thank you for inquiring about a financial adjustment for fees at the Riverdale YM-YWHA.

In response to your request for financial assistance, our procedure requires that you fill out the enclosed confidential Financial Aid Request application and return it along with copies of the following documents and your application for enrollment to the director of the program, who will then submit it to the Financial Aid Committee.

Please include the following documents:

1. Copy of your latest 1040 and W2 forms. (An individual living with parents who support him/her financially must submit parents' 1040 form)

(Where applicable)

2. Separation/Divorce agreement
3. Childcare agreement
4. A.D.C. #, SSI or Public Assistance
5. Food Stamps
6. Other pertinent documents

For additional security, *please black out all social security numbers* before submitting. For Camp, Early Childhood Center, and Kid's Space After School Program applications, a deposit of \$250.00 is required.

Your application will be reviewed upon receiving all the information and documentation listed above, and an interview may be scheduled with a member of the Financial Aid Committee. Please be sure to include the amount you are able to pay as well as any additional sources of funds, on the attached application, or the process may be delayed.

If placing a deposit is a hardship, please speak directly with the Early Childhood, Camp or Kid's Space Director prior to submitting your forms.

Thank you for your cooperation.

Sincerely,

Matt Abrams Gerber
Chief Operating Officer





Scholarship Application

CONFIDENTIAL

Riverdale YM-YWHA / 5625 Arlington Ave., / Bronx, NY 10471 / (718) 548-8200

PLEASE PRINT

Primary Information

Family Name _____

Street _____ Apt # _____

City _____ State _____ Zip _____

Home phone (____) _____ Cell phone (____) _____

Email _____

Religion (optional) Jewish Catholic Protestant Other _____

Name of House of Worship _____

Marital Status:

Married Single Divorced (date _____)

Widowed (date _____) Separated (date _____)

Type of Scholarship Requested
(check all that apply)

- Membership
 - Family
 - Single Parent
 - Individual
 - Senior Individual
 - Senior Couple
 - Senior Individual Limited
 - Senior Couple Limited
 - Teen
 - Young Adult
- Camp
- Kid's Space After School
- Early Childhood Center
- Other _____

Adult # 1

Gender __ Birth Date ___/___/___

First Name _____

Last Name _____

Occupation _____

Name of Employer _____

Address _____

City/State/Zip _____

Bus. Phone (____) _____

Your Position & Title _____

Dept. & Supervisor _____

Adult # 2

Gender __ Birth Date ___ /___/___

First Name _____

Last Name _____

Occupation _____

Name of Employer _____

Address _____

City/State/Zip _____

Bus. Phone (____) _____

Your Position & Title _____

Dept. & Supervisor _____

Children

Under 18 years of age

First Name	Middle Initial	Last name (if different from family name above)	Gender	Birth Date	Grade
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please answer all of the following which apply to you:

Are you currently a Y member?

Yes No

Have you ever been a member of the Y?

Yes (when? _____) No

Have you ever received a Y membership scholarship?

Yes What year? _____ How much? _____ No

Have you ever received a camp scholarship?

Yes What year? _____ How much? _____ No

Have you ever received an Early Childhood scholarship?

Yes What year? _____ How much? _____ No

Have you ever received a Kid's Space After School Program scholarship?

Yes What year? _____ How much? _____ No

***How much can you afford to pay? _____**

Do you require a payment plan? Yes (how many payments?) No

Financial Information:

Worker # 1 (name) _____

Annual wages \$ _____

Other income:

Child support \$ _____

Alimony \$ _____

Public Assistance \$ _____

A.D.C \$ _____

Pensions \$ _____

Social Security \$ _____

Other (specify) \$ _____

Additional sources of funds _____

Total income other than wages \$ _____

Worker # 2 (name) _____

Annual wages \$ _____

Other income:

Child support \$ _____

Alimony \$ _____

Public Assistance \$ _____

A.D.C \$ _____

Pensions \$ _____

Social Security \$ _____

Other (specify) \$ _____

Total income other than wages \$ _____

Expenses and Liabilities:

Rent/Mortgage \$ _____

School Tuition \$ _____ # of children? ____

Unusual Expenses \$ _____

(please specify) _____

Check one: apartment house

Check on: own rent

Do you own an automobile?

No Yes – Year? ____ Make _____

2nd car Yes – Year? ____ Make _____

Please note whether other family or friends are able to assist you: No Yes

If yes, how much can they contribute: _____

Other special circumstances _____

I certify that the information contained in this application is correct and give permission to the Riverdale YM-YWHA to verify any of this information.

Signature _____

Date: _____

For Office Use:

Membership type _____	\$ _____
Processing Fee _____	\$ _____
Received (date) _____	Nursery School _____ \$ _____
Reviewed (date) _____	Registration Fee _____ \$ _____
_____ 1040 Form	After School Program _____ \$ _____
_____ W-2 Form	Camp (which?) _____ for _____ \$ _____
_____ Sep/Div Agreement	Camp (which?) _____ for _____ \$ _____
_____ Childcare Agreement	Total fee _____ \$ _____
_____ A.D.C.	Less Scholarship for _____ \$ _____
_____ Public Assistance	_____ \$ _____
_____ S.S. I.	_____ \$ _____
_____ Food Stamps	Plus Installment Fee _____ \$ _____
_____ Other	Total fee to be paid: _____ \$ _____
Type of Scholarship _____	Less Deposit _____ \$ _____
_____	BALANCE DUE _____ \$ _____

Interviewed by _____ Date _____

Action Taken _____ Date _____

The services, programs, and facilities of the Y are available to all residents of the community regardless of race, color, religion, or gender. Membership in the Y is open to all regardless of financial circumstance. Financial aid is available, based on need, and limited only by the availability of scholarship funds.

