



December 1, 2024

Dear Camp Scholarship Applicant,

The National Council of Jewish Women Valencia Shores Section is pleased to offer \$1,000 Camp Scholarships to Palm Beach County families whose Jewish child(ren) will be attending camp this summer. Children 5 to 13 years old, born between January 1, 2012 and December 31, 2020, are eligible. ***The scholarship is based primarily upon financial need and/or special circumstances.***

The family must submit a completed questionnaire, the first two pages of your 2023 or 2024 1040 tax return forms and two letters of recommendation. These must be mailed to NCJW, c/o Ms. Sandra Platzman, 8178 La Jolla Vista Lane, Lake Worth, FL 33467 or emailed to **sandymae41@gmail.com**. All parts of the application packet must be postmarked by March 6, 2025. The information is shared only with the committee. *The stipend will be presented at the Awards Ceremony.*

Recipients will be notified in early April and we will hold the presentation on Thursday, April 24, 2025. Do not hesitate to call if you have questions 561-968-4415.

Sincerely yours,

Sandra Platzman

Chairperson of the Scholarship Committee

National Council of Jewish Women Valencia Shores Section

The National Council of Jewish Women is a grassroots organization of volunteers and advocates who turn progressive ideas into action. Inspired by Jewish values, NCJW strives for social justice by improving the quality of life for women, children and families and by safeguarding individual rights and freedoms.

NATIONAL COUNCIL OF JEWISH WOMEN

Valencia Shores Section

CAMP SCHOLARSHIP APPLICANT DATA

Name of camper(s) _____ Date of Birth: MM/DD/YYYY _____

Parent/Guardian name: Last _____ First _____

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Parents' marital status: Married ___ Divorced ___ Separated ___ Single ___ Widowed ___

(Custodial) Parent address _____

City, State, Zip Code _____

Do you own your home? No ___ Yes ___ Mortgage payment _____

Residence phone _____ Cell phone _____ email _____

Number of other children in the household _____ Ages _____

Have you received an NCJW Scholarship in the past? Yes ___ No ___

Does the child have an IEP? Yes ___ No ___

Is your family receiving free or reduced lunch, or state or federal subsidies? Yes ___ No ___

To help us determine financial need, please provide the first two pages of the 2022 or 2023 1040 tax return forms of the custodial parent which indicate your taxable income.

Camp name _____ Phone number _____

Camp address: _____

Cost of camp _____ Number of weeks _____

Use an additional sheet of paper to answer the following questions.

1. Please describe in detail, any special circumstances that have affected your family's ability to pay for camp.

2. In what ways do you feel your child and/or your family will benefit from a camp experience?

Parent/Guardian signature _____ Date _____

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CAMP SCHOLARSHIP APPLICANT RECOMMENDATION

You have been asked to provide information in support of this camp scholarship application. We appreciate your time and effort. (To be completed by an involved adult.)

Parent's name _____ Camper's name: _____

How long have you known this applicant? In what capacity? _____

Are you aware of any financial circumstances that would make the family eligible for a scholarship? Why do you believe that this applicant should receive and would benefit from a camp scholarship?

Additional comments _____

Your name _____ Title/Relationship _____

Contact# _____ Address _____

Please return to Sandra Platzman, 8178 La Jolla Vista Ln, Lake Worth, FL 33467 or sandymae41@gmail.com by March 6, 2025. Questions? Call 561-968-4415

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