



Rising Treetops at Oakhurst

111 Monmouth Road, Oakhurst, NJ 07755, (732) 531-0215, fax: (732) 531-0292, services@risingtreetops.org

GENERAL SCHOLARSHIP REQUEST FORM
(TO BE FILLED OUT BY PARENT/GUARDIAN OF CLIENT APPLICANT)

Limited income-based sliding scale scholarships are available for Rising Treetops’ summer camp and overnight respite services, and eligibility is based on financial need. In terms of financial need, in addition to household income, other factors, such as a recent job loss or extraordinary medical expenses, may be taken into consideration. Scholarship applications can only be considered after copies of 2024 Federal Income Tax returns (if filed) or if not filed 2023 Federal Income Tax returns and 2024 W2s for **any and all** individuals living in the same household with the client applicant are submitted. For individuals receiving public assistance or other government benefits (e.g., Social Security, SSI, Unemployment benefits), a copy of the Determination of Benefits/Award letter or documentation of 2024 unemployment benefits must also be submitted. **(Do not submit original documents; only copies, as they will not be returned.)**

CLIENT APPLICANT'S FULL NAME _____

Please describe in detail any unique circumstances you may have that we should consider that may not be evident on your Tax Returns, W2 and/or Determination of Benefits/Award or Unemployment documentation, such as a recent job loss or extraordinary medical expenses. These may be taken into consideration (use an additional sheet if needed):

FAMILY SIZE INCLUDING APPLICANT

Number of Adults (over age 18) living at home: _____

Number of Children (18 and under) living at home: _____

TOTAL FAMILY/HOUSEHOLD INCOME \$ _____ [] weekly [] monthly [] yearly

Source of Income (check all that apply): [] Self Employed [] Salary or Wages [] Unemployment Benefits
[] Public Assistance [] Social Security/SSI Disability Benefits [] Private Pension/Retirement Fund

Verification (please attach): [] Federal Tax Return(s) for 20__ [] W-2 Form(s) for 20__
[] Unemployment Income Documentation [] Determination of Benefits/Award Letter(s)

PLEASE ATTACH ANY OTHER INFORMATION THAT MIGHT HELP DETERMINE IF YOU ARE ELIGIBLE FOR A RISING TREETOPS' SCHOLARSHIP. PLEASE SIGN VERIFYING ALL THE INFORMATION PROVIDED IS TRUTHFUL AND ACCURATE:

Signature of Parent, Guardian

Date