Jewish Community Center of Greater Pittsburgh Scholarship Application

JCC PROGRAMS YOU	NEED ASSISTANCE W	ITH (Please che	eck all that ap	ply)	
☐ Squirrel Hill Members	hip 🗆 South Hills	Membership	☐ Early Childho	ood	
☐ Clubhouse ☐ EKG	☐ Day Camps	□ Maccabi Ga	mes 🗆 Swii	n Team	☐ J Line
Name			Birth Date		
Type of Membership:	□ New □ Renewal □ Other				
Marital Status (check or	ne): 🗖 Married 🗖	Single 🗖 Divor	ced 🗖 Widow	/ed □ Se	eparated
Address					
Home Phone					
Employer			Position		
Work Phone	Fax		E-mail Address		
Length of Employment	Sa	lary	Monthly	Gross	
Spouse/Partner Name			Birth Date		
Employer					
Work Phone					
Length of Employment	Sa	ılary	Monthly	Gross	
DEPENDENTS:					
Name	Birth Date	Grade/Sc	hool		
Name	Birth Date	Grade/Sc			
Name	Birth Date	Grade/Sc	hool		
Name	Birth Date	Grade/Sc	hool		
Name	Birth Date	Grade/Sc	hool		

INCOME SOURCES (Please IIS	t annual income before tax):	
Child Support \$	Alimony \$	S.S.I. \$
Unemployment Comp. \$	Soc. Security \$	Food Stamps \$
Worker's Comp. \$	Interest/Dividends \$	Pension \$
Salaries \$	Total Income \$	
REQUIRED DOCUMENTATION:		
 A full copy of your most red (1, C, D, or E) 	cent 1040 Tax Return, be sure to inc	lude any correlating Schedule
• A copy of your most recent	W-2 Forms (also for your spouse if	applicable)
A copy of your two most re	cent pay stubs (also for your spous	e if applicable)
	cent pay stubs (also for your spouse eceive SSI, Pension, or a School Stip	• • • • • • • • • • • • • • • • • • • •
Any documentation if you r		• • • • • • • • • • • • • • • • • • • •
Any documentation if you r CERTIFICATION:		end
Any documentation if you r CERTIFICATION:	receive SSI, Pension, or a School Stip	end
Any documentation if you recommendation if you recommend to the commentation provided here. Signature	eceive SSI, Pension, or a School Stip	true, accurate and complete
• Any documentation if you recommend to the contact information provided here. CONTACT INFORMATION IF DIRECT CONTACT INFORMATION IF DIRECT CONTACT INFORMATION IF DIRECT CONTACT CONTACT INFORMATION IF DIRECT CONTACT CONTAC	eceive SSI, Pension, or a School Stip	true, accurate and complete
• Any documentation if you r CERTIFICATION: The information provided here Signature CONTACT INFORMATION IF DI Name	eceive SSI, Pension, or a School Stip	true, accurate and complete
Any documentation if you reconstruction. CERTIFICATION: The information provided here Signature CONTACT INFORMATION IF DI Name Address	eceive SSI, Pension, or a School Stip	true, accurate and complete Date

awarded based upon an assessment of each applicant's financial situation and JCC Guidelines. Adjusted Gross Income and family size are taken into account in determining eligibility and the amount of scholarship.



PLEASE RETURN THIS FORM TO

Scholarship Administrator Jewish Community Center of Greater Pittsburgh 5738 Forbes Ave. • Pittsburgh, PA 15217 412-697-3525 • scholarship@jccpgh.org. • FAX: 412-521-7044

The JCC is open and accessible to everyone, regardless of age, race, religion, national origin, sexual orientation, gender identity, gender expression or special need by welcoming individuals of all backgrounds, embracing their uniqueness and diversity under our communal tent.