Financial Assistance / Scholarship Application 2026-2027

Thank you for applying for financial assistance/scholarship at the Tucson J. It is our philosophy that everyone should have the opportunity to participate in our community, regardless of personal financial circumstances. For this reason, we are proud to offer financial assistance and scholarships to individuals and families who qualify. Please note that financial assistance is awarded in accordance with federal guidelines.

We understand that requesting assistance can feel difficult. Please know that we value your privacy and handle every application with the utmost discretion. Your information will be shared only with the small team directly involved in the review process.

Financial assistance is available for commitment-based memberships, childcare, and select programs. We also encourage applicants to explore additional resources that may provide further support, such as DES, DDD, Interfaith Community Services, and other local or government assistance programs, if eligible.

This application covers the following programs and services for the dates listed below:

- **Tucson J Membership**: May 2026 – April 2027
- **Camp J**: Summer 2026 and Winter 2026
  (Membership required for scholarship consideration)
- **Early Childhood Education (ECE), JCare, and School Days Out Programs:** 2026–2027 school year *(Membership required for scholarship and/or program participation)*

Application Deadlines and Review Process

- Applications for **renewing** financial assistance/scholarship are **due no later than April 30, 2026.**
- Applications for **new applicants** are accepted on a rolling basis from **January 1 through December 31, 2026.**
- **Camp J (Summer 2026) scholarship requests** must be submitted by **March 31, 2026**, to allow time for review and award notification prior to the refund deadline of **April 17, 2026**. Late or incomplete applications may not receive assistance for camp programs.

The review process for renewals begins on **April 1, 2026**. The Financial Aid Committee meets weekly, and applicants can expect to receive an email regarding their application within two weeks of review, starting after April 1.

After April 30, new applications will continue to be accepted on a rolling basis, with awards granted based on the availability of funds. Rolling applications are reviewed weekly by the Financial Aid Committee; however, holidays and vacation periods may result in processing delays.

To be considered for assistance, please provide the following:

- Complete this application in its entirety. Please write legibly!
- Make sure to include information for EVERYONE living in your household, regardless of who will be on the membership or attending the program.
- Submit the following supplemental information with this application:
  - Membership Application (new members + rejoining) please note some programs require membership for admission and for scholarship.
  - Childcare registrations (if applying for tuition assistance for Early Childhood Education/ Summer, Winter Camp/JCare, after school child care /School Days Out)

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- One or more of the following financial records for each individual 18+ in your household (regardless who will be on the membership or participating in the program):
  - 2025 Tax Return
  - 2025 W2
  - 2025 Government Benefits Letter- unemployment, SSI, disability insurance letter (that shows monetary award, and income), We do not accept copies of benefit cards.
  - 2 most recent pay stubs
  - If you do not have access to any of the above listed items please email membership@tucsonjcc.org to discuss other accepted items.

Awards are presented in a percentage amount rather than dollar award. If you make changes to your membership or program registration during the award term, the percentage will remain the same. If you are interested in participating in additional programs or services during the award term, you will need to contact us for a second review and approval. We do ask if your situation changes for the better or worse you contact us to conduct an additional review of your application with updated information. Please utilize the extraordinary expenses and special circumstances section to share any information we should consider that is not clear based on your financials.

You can also complete this application online and upload your documents at: https://tucsonjcc.org/financial-assistance/

Please send all completed applications with supporting documentation to:
Tucson J
C/O Samantha Thompson
3800 E River Rd, Tucson, AZ 85718 Or email sthompson@tucsonjcc.org

Sincerely,

Samantha Thompson

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Household Information

Make sure to include all individuals that live in the household regardless if they will be on the membership or attending programs.

(All Fields Required, print clearly)

Adult 1

First and Last Name: _____ DOB: _____ Gender Identity: _____
Address: _____
Home/Cell Phone: _____ Work Phone: _____
Email: _____
Employer:_____ Position/Title: _____
FT or PT (circle one)
Marital Status: _____ Race: _____ Ethnicity: _____
Religious Affiliation: _____

Adult 2

First and Last Name: _____ DOB: _____ Gender Identity: _____
Address: _____
Home/Cell Phone: _____ Work Phone: _____
Email: _____
Employer:_____ Position/Title: _____
FT or PT (circle one)
Marital Status: _____ Race: _____ Ethnicity: _____
Religious Affiliation: _____

Dependents (list all legal dependents you claim on your taxes) (All Fields Required, use an additional sheet of paper if needing more space)

First and Last Name: _____ DOB: _____
School Attending: _____ Current Grade: _____
Relationship to adults: _____
Resides with applicants: PT/FT Gender Identity: _____ Race: _____ Ethnicity: _____
Religious Affiliation: _____

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Resides with applicants: PT/FT Gender Identity: _____ Race: _____ Ethnicity: _____
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Note Please add information for additional dependents in extraordinary expense section if you run out of space here

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Income

Adult 1 | (All Fields Required)
Monthly Salary and/or business income: $_____
Monthly Child Support/Alimony: $_____
Monthly Unearned income (interest, dividends, pension): $_____
Monthly Gifts (loans or support from family/friends): $_____
Other (please specify): _____
Are you currently receiving financial assistance for any other agency or institution? ☐Yes ☐No
If yes, please explain:_____
_____
_____
Total Monthly Income: _____
Annual Gross Income: _____

Adult 2 | (All Fields Required)
Monthly Salary and/or business income: $_____
Monthly Child Support/Alimony: $_____
Monthly Unearned income (interest, dividends, pension): $_____
Monthly Gifts (loans or support from family/friends): $_____
Other (please specify): _____
Are you currently receiving financial assistance for any other agency or institution? ☐Yes ☐No
If yes, please explain:_____
_____
_____
Total Monthly Income: _____
Annual Gross Income: _____

Total Household

Monthly $ _____ Annually $ _____

Monthly Expenses

Do you own or rent your home? ☐Own ☐Rent
Monthly mortgage or rent: $_____
Monthly Child Support/Alimony Payments: $_____ Monthly Utilities: $_____
Monthly Car Loan Payment(s)(excluding Insurance): $_____ Monthly Groceries: $_____
Monthly Medical payments (aside from health insurance premium): _____
Monthly School Tuition (for adults or dependents): _____
Other Monthly (please specify amount and expense type): _____
_____
_____
Total monthly expenses: _____

Describe any extraordinary expenses, special circumstances, including anticipated duration of circumstance. These are items or reasons for the application that are not clear based on the numbers and financial statements. Use this section to note additional dependents if you did not have space for them above provided.
_____
_____
_____
_____
_____

How long do you anticipate needing financial assistance? _____
_____
_____

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Programs/Services

Are you applying for membership (membership is required to apply for scholarship for childcare programs ECE, JCare +Camp J)? ☐ Yes ☐ No ☐ Already a Member
If yes how much are you able to pay monthly? _____

Are you applying for Early Childhood Education (childcare for ages 6weeks- Pre-K)? ☐ Yes ☐ No
If yes how much are you able to pay monthly? _____

Are you applying for JCare + School Days Out (after school child care and school break coverage for grades K-5) ☐ Yes ☐ No
If yes how much are you able to pay monthly? _____

Are you applying for Camp J (Summer '26 or Winter Camp '26 entering grades K-9)? ☐ Yes ☐ No
If yes how much are you able to pay weekly?_____

Signature + Agreement:

I hereby state that the information provided on this application is complete and correct to the best of my knowledge. I understand that if I accept a Financial Assistance award, I am responsible for paying all balances by the agreed upon dates.

Signature
Printed Name
Date