

Financial Assistance Application

Camp McFadden of Ponca City, Oklahoma provides financial assistance to the extent possible to those in need. Proof of income is required, and eligibility is determined by comparing your gross annual household income to Housing and Urban Development Income guidelines for Kay County. We also take into consideration the number of people supported by your income. Once submitted, your application will be reviewed, and you will be notified within one week. Assistance will be granted on a first come first serve basis.

Section 1: Parent/Guardian information		
Legal First Name	MI	Legal Last Name
2 nd Adult Legal First Name	MI	Legal Last Name
Address	APT	CITY/STATE/ZIP
Phone Number	Primary Email	

Section 2: Assistance Request		
Child's Legal First Name	MI	Child's Legal Last Name
Camp You Wish to Attend		

Section 3: Income Verification			
Household Monthly Income	Household monthly income includes all sources including assistance and child support.	<u>Applicant:</u>	<u>2nd Adult:</u>
Number of adults supported by above income ___ Number of children supported by above income ___			
Attach the following Documents	<p>If there are two adults in the household, documents must be provided for both adults to verify the income listed above.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Registration form <input type="checkbox"/> Federal Income Tax Filing for previous year (W2 forms do not qualify) OR <input type="checkbox"/> Two months of paycheck stubs for all adults in household <input type="checkbox"/> Current SSA/Social Security Retirement Documents <input type="checkbox"/> Current Statement of Award of Benefits for TANF, SSI, GAU or other public assistance <input type="checkbox"/> Most recent unemployment check stubs 		

	<input type="checkbox"/> An official letter from a case manager or similar such authorities if you are unemployed, not receiving benefits, participating in a structured job training, rehabilitation program, or homeless or living in a homeless shelter
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If you feel you have extenuating circumstances not evident by the above information, you may a statement below explaining your current situation.