

**The Jewish Federation of Lane County
Scholarship Application**
REVISED NOVEMBER 2009

Jewish Youth Experience Scholarships will financially assist and encourage young people to attend Jewish oriented conferences/events in the U.S. and in Israel.

- Any Jewish youth age 5–19 who resides in Lane County and is enrolled in a K–12 educational program is eligible to apply.
- Students who wish to participate in programs that occur the summer following high school graduation will also be eligible to apply.
- College students are **not** eligible for scholarships.
- Most scholarships awarded range from \$50–\$200. The amount of the award is contingent on individual need, number of applicants, and availability of funds.

DUE TO LIMITED FUNDS, SCHOLARSHIPS ARE EXPRESSLY INTENDED FOR THOSE WHO COULD NOT PARTICIPATE IN A CONFERENCE OR PROGRAM WITHOUT FINANCIAL ASSISTANCE.

Please submit your application at least 3 weeks before the event/conference. No scholarship monies will be awarded without the Statement of Purpose, including a picture of the applicant. (Picture and statement may be printed in our newsletter.)

The Follow-up Form and picture should be mailed to the Federation within 2 weeks of the event/activity.

Date _____

Name of applicant _____

Address _____

Phone (Home) _____ (Cell) _____

School _____ Grade ____ Age ____

What kind of Jewish experience have you had up until now? Be specific.

Name of conference/activity/camp _____

Date of event _____ Location _____

Name of sponsoring organization _____

Costs:

• tuition: _____ • transportation: _____ • lodging: _____ • food: _____

Total cost: \$ _____

Amount of request: \$ _____

Is financial assistance available from the sponsoring organization? _____

Have you applied for assistance from other sources? _____

How much will you receive from the above? \$ _____

Mother's name _____ Occupation _____

Employer _____ Work phone _____ Home phone _____

Father's name _____ Occupation _____

Employer _____ Work phone _____ Home phone _____

Family's annual income _____

Parent's marital status: married _____ divorced _____ separated _____

Applicant lives with _____ How many people live in your household? _____

Other financial information which explains applicant's need for scholarship

ALL APPLICANTS MUST COMPLETE THE STATEMENT OF PURPOSE AND THE FOLLOW-UP FORM AND PROVIDE PHOTOGRAPHS SUITABLE FOR USE IN THE FEDERATION NEWSLETTER.

By signing below, my parent/guardian and I affirm that the statements made in this application accurately reflect our situation. We agree to adhere to the guidelines for this scholarship.

Signature of applicant _____

Signature of parent _____ Date _____

ALL INFORMATION WILL BE HELD IN STRICTEST CONFIDENCE.