

ENCAMPMENT SCHOLARSHIP FORM 2014
PLEASE COMPLETE IN FULL - PLEASE PRINT

DEADLINE DATE: JUNE 25, 2014

APPLICATION MUST BE COMPLETED IN FULL – WITH ESSAY AND RECOMMENDATION FORM – IN ORDER TO BE CONSIDERED

ESSAY QUESTION: *All applicants are to answer the following essay question:*

Encampment will be a great experience. What specific experience (socially, educationally, culturally, religiously) do you anticipate? How do you intend to relate these experiences back to other members in order to enhance your own chapter and/or your community. Please be specific.

In addition to this application please send a **letter of recommendation** from your Rabbi, Cantor, Education Director, Youth Director or Youth Advisor. **Your application will not be considered without this letter.**

NAME _____ EMAIL _____

ADDRESS (street,city,state,zip) _____

AGE _____ GRADE _____ NUMBER OF YEARS IN USY _____

_____ I WILL BE ATTENDING THE ENTIRE WEEK _____ I WILL BE ATTENDING THURS - SUN

FATHER'S NAME & OCCUPATION _____

MOTHER'S OCCUPATION _____

PARENT/GUARIDIAN CONTACT (NAME & CELL PHONE) _____

OTHER CHILDREN IN FAMILY & GRADE IN SCHOOL _____

NAME OF USY CHAPTER & SYNAGOGUE _____

NAME OF RABBI _____

NAME OF ADVISOR &/OR YOUTH DIRECTOR _____

DESCRIBE YOUR JEWISH EDUCATION _____

SCHOOLS ATTENDED	GRADE LEVEL	DATES
_____	_____	_____
_____	_____	_____
_____	_____	_____

List your involvement in your local USY Chapter, Regional USY and other Jewish groups, Synagogue life and in the Jewish Community at large. Include offices and positions held, conventions attended, etc.

I have been a member of USY for at least one year prior to the date of this application:
YES _____ NO _____

FINANCES (Note the following information will be kept confidential)

Please approximate how you are planning to finance Encampment '14 in dollar amounts.

Yourself \$ _____
Parents & Family \$ _____
Synagogue & Scholarships \$ _____
Regional USY Scholarship \$ _____
Other (specify) \$ _____

Please check family income range:

\$30,000 - \$50,000 _____ \$85,000 - \$100,000 _____
\$50,000 - \$70,000 _____ \$100,000 - \$150,000 _____
\$70,000 - \$85,000 _____ \$150,000 - \$200,000 _____
\$200,000 and over _____

Please indicate whether you are applying for and/or, at this point have received or anticipate receiving a partial scholarship or subsidy from other sources. If further subsidies come from other sources after filing this application, please send us supplementary information concerning these subsidies.

Source _____ Amount \$ _____
Source _____ Amount \$ _____
Source _____ Amount \$ _____

Please indicate on a separate page any additional personal or family information that you feel may be of use to the committee in evaluating this scholarship application.

Parent's signature _____

USYers signature _____

DEADLINE DATE: JUNE 25, 2014

Please return your application, essay and letter of recommendation to:

NERUSY ALUMNI & FRIENDS

1320 Centre Street, Suite 304, Newton, MA 02459

OR email to:

scholarships@nerusy.org