

**Jewish Federation of New Hampshire
Irving and Bernice Singer Israel Experience Grant Application**

Send completed application to: Nancy Frankel, Israel Experience Grant Chair,
7 McAllister Road, Bedford, NH 03110 (corkyatcf@aol.com). Phone (603) 472-3983.

Parent(s)/Guardian(s) Information:

Names: _____

Phone: _____ Email: _____

Address: _____

City, State, Zip: _____

Synagogue Affiliation: _____

Student's Information:

First Name: _____ Last Name: _____

Phone: _____ Email: _____

High School Currently Attending: _____

_____ I am applying for the grant of \$1000.

_____ I am applying for the grant of \$1800. I have continued through 10th grade or completed the high school program at the following synagogue _____.

Trip Information:

Name of Israel Program: _____

Dates of Trip: _____

Name of Specific Trip: _____

Name of Trip Provider: _____

Address of Trip Provider: _____

City, State, Zip: _____

Contact Person

Phone Number

We understand that the grant will be sent directly to the trip provider when the statement is submitted to the JFNH.

We understand that our family must participate in the current JFNH Annual Campaign with a paid pledge of \$100 or more.

We also understand the following Teen Expectations:

- To submit an article for the NH Jewish Reporter upon their return
- To share their experiences and promote this program by speaking at a New Hampshire Synagogue or teen event

Signature of Teen

Date

Signature of Parent

Date