



## COLLEGE SCHOLARSHIP APPLICATION

The Henry Simkin and Frances Simkin Schiller and Dr. Stanley and Faye Simkin Scholarship Fund

**Eligibility:** Any graduating high school senior who has demonstrated high academic scholarship as well as leadership and participation in the Berkshire Jewish Community may apply. To be considered, student's family must be a current contributing donor to the Jewish Federation of the Berkshires.

**DEADLINE: APRIL 14, NO EXCEPTIONS**

PLEASE PRINT AND USE A PEN. APPLICATION MUST BE LEGIBLE TO BE CONSIDERED

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of parent(s) or guardian(s): \_\_\_\_\_

Father's (guardian's) occupation: \_\_\_\_\_

Place of employment: \_\_\_\_\_

Mother's (guardian's) occupation: \_\_\_\_\_

Place of employment: \_\_\_\_\_

High school attending: \_\_\_\_\_

List all school activities which you have participated in (include clubs, athletic teams, committees, etc.; if you held an office, please indicate.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List membership/participation in community organizations/activities (Jewish or non-Jewish). Please indicate the service you render these organizations including any officer or leadership position:

Organization: \_\_\_\_\_

Service you render: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization: \_\_\_\_\_

Service you render: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization: \_\_\_\_\_

Service you render: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization: \_\_\_\_\_

Service you render: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Please list your hobbies and interests in athletics:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**College or university you expect to attend:** \_\_\_\_\_

Have you been accepted: \_\_\_Yes \_\_\_No

Courses or curriculum of interest: \_\_\_\_\_

Pursued occupation: \_\_\_\_\_

How do you plan to help yourself through college: \_\_\_\_\_

Are you currently employed \_\_\_Yes \_\_\_No      Reported earnings: \$ \_\_\_\_\_

Have you received or applied for other scholarships: \_\_\_Yes \_\_\_No

Scholarship: \_\_\_\_\_

Scholarship: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Status of award: \_\_\_\_\_

Status of award: \_\_\_\_\_

**List Two (2) character references (NOT a relative):**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

**PLEASE ENCLOSE THE FOLLOWING WITH YOUR APPLICATION:**

- 1. scholastic record transcript from your school**
- 2. Attach a 2 page essay detailing your involvement and leadership in the Jewish community as well as your aspirations for the future.**

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

***Please return to:  
Jewish Federation of the Berkshires, 196 South St. Pittsfield, MA 01201  
federation@jewishberkshires.org***