Partial Scholarships

# Available for

### TN00675_Jewish

### Summer

### Camps



Israel

Experience

Programs

For additional information contact:

Jewish Federation of Collier County

263-4205

or

Beth Wolff – 239-248-2925 winggy1@gmail.com

Scholarship deadlines:

Summer Camps: December 15, 2017

Israel Programs: February 1, 2018

2018 Jewish Camp/Israel Experience Scholarship Program

The Jewish Camp/Israel Experience Scholarship Fund has for many years been comprised of monies contributed by Jewish Federation of Collier County, Temple Shalom, and some very generous private donors in our community.

We offer partial scholarships for educational programs and experiences in Israel and Jewish summer camps, available for Jewish children residing in Collier County. We have a set amount of money budgeted each year, while the number of applicants varies from year to year. The amount of each scholarship depends on individual need as well as the number of children requesting scholarships. It is our goal to make scholarships available to all eligible applicants.

We consider applications for admission to Jewish camps: URJ (Union of Reform Judaism) Camp Coleman, USY (United Synagogue Youth) Camps and all other qualified Jewish camps**.**

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**All incomplete or applications received after this date will not be considered.**

We have to know up front the maximum amount that you are able to contribute. This amount should be based on the child’s input, and parents and other relatives who are willing to contribute. The committee feels it is important that each child also contribute. The amount can be based on money the child has already saved, or what they anticipate earning between now and camp, the amount they will be able to earn doing chores, baby-sitting, etc.

In return for the scholarship money, each recipient will be asked to write a one-page essay about their camp/Israel experience to be published anonymously in the *Federation Star* newspaper. Each recipient and their families will be asked to give back to the community as a volunteer at their respective congregation or with the Federation.

If you have questions please call the Federation at 263-4205 or Beth Wolff at 248-2925 or email winggy1@gmail.com

**APPLICATIONS MUST PROVIDE COMPLETE INFORMATION**

**FOR SCHOLARSHIP CONSIDERATION.**

## Jewish Camp/Israel Experience Scholarship Application Form

***Partial scholarships are available for educational programs and experiences in Israel and Jewish summer camps, which have been validated by the Scholarship Committee.***

**(PLEASE PRINT LEGIBLY)**

Applicant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Grade­­­ \_\_\_\_\_\_\_\_\_\_\_

Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Annual Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family information:

Number of children in household \_\_\_\_\_\_\_ Ages \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_

Do you \_\_\_\_\_ Rent or \_\_\_\_\_ Own your home

Amount of monthly mortgage/rent $\_\_\_\_\_\_\_\_\_\_ Annual property taxes $\_\_\_\_\_\_\_\_\_\_\_

Number of cars in household \_\_\_\_\_\_\_\_\_ Do you own/lease your vehicles \_\_\_\_\_\_\_\_\_\_\_\_

Year/Make \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extenuating circumstances \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

PLEASE ATTACH A COPY OF YOUR MOST CURRENT COMPLETE

1040 INCOME TAX RETURN (ALL PAGES & SCHEDULES)

ONE COPY PER FAMILY (IF THERE ARE MULTIPLE APPLICANTS)

IMPORTANT: BLACK OUT YOUR SSN/TAX ID NUMBER

### **PROGRAM INFORMATION:**

Program Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of Program (check one) \_\_\_\_\_\_\_\_\_\_ Summer Camp \_\_\_\_\_\_\_\_\_\_ Israel Experience

Beginning Date of Program\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### PRIOR CAMP/ISRAEL EXPERIENCE:

Have you ever been to Israel or a Jewish Camp? \_\_\_\_\_\_YES \_\_\_\_\_\_NO

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Program/Camp Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Scholarships - Agency and Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### **APPLICANT’S JEWISH INVOLVEMENT:**

Congregation Affiliation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth Group Membership\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Jewish Involvement/Activities (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STATEMENT:**

***IMPORTANT!* A statement (on separate attached paper) of approximately 300 words explaining why you want to travel to Israel or attend a Jewish summer camp at this time is required.**

Signature of Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return to:** **Jewish Federation of Collier County**

 **2500 Vanderbilt Beach Road**

**Suite 2201**

 **Naples, FL 34109-0613**

 **Phone: (239) 263-4205 Fax: (239) 263-3813**

Scholarship deadlines:

Summer Camps: December 15, 2017

Israel Programs: February 1, 2018

**All incomplete or applications received after this date will not be considered.**

In return for the scholarship money, each recipient will be asked to write a one-page essay about their camp/Israel experience to be published anonymously in the *Federation Star* newspaper. Sometimes a family Shabbat service at Temple Shalom is specifically designated for the children to tell of their experiences and we would also expect participation in that.

**Camp/Israel Financial Summary**

###### Please provide documentation of camp or program cost.

Each item on the application must be completely filled out. Incomplete applications or applications received after the deadline will not be considered.

**Interviews with the applicant and parent(s) will be set up after the application deadline.**

**\*** Israel Experience Programs routinely offer scholarships through the sponsoring agency. Applicants are required to apply for all additional scholarships.

**Airfare:**

Israel Experience – Airfare from Miami **is considered** part of the program cost.

Summer Camp – Airfare is **not considered** part of the camp cost.

1. Camp or Israel Program Cost $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Family Contribution:**
2. Amount provided by applicant $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Amount provided by applicant’s family $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Other Scholarships Applied For:**
4. Amount Requested**\***: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Requested From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Total of lines 2, 3, & 4 $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Total Scholarship Requested (Line 1 minus line 5) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_