



THE FOUNDATION
Jewish Communities of Western CT, Inc.

College Scholarship Application Instructions

THE Foundation, Jewish Communities of Western CT, Inc.
444 Main Street North, Southbury, CT 06488 • 203-267-3177

The Grants & Allocations Committee encourages you to review the entire application before making your decision to apply. The Committee accepts complete application packages only and these must be received no later than April 15th. You must complete each section according to the instructions and criteria set forth in that section. All applicants must be in good standing with their current institution (not on academic or other probation.) The Committee recommends that you give thoughtful consideration and time to crafting a competitive application. Scholarship awards will be announced on or about May 15th, 2010. The application is an electronic form that can be completed online, printed, and sent with all other application materials. It is available at the Foundation tab at the Federation website <http://jfed.net>, "About Us – Grants –College Scholarships."

Directions: Our form is easy to use. Just download the form, click in the boxes and type your data in the forms. Finally, save it and mail ten copies, along with one copy of your official transcript and each letter of recommendation to The Foundation at the address above.

The Dr. William Finkelstein College Scholarship:

Eligibility: Jewish undergraduate students accepted or attending an accredited undergraduate college/university.

Qualifications: Financial Need

Residency requirements: The greater Waterbury area, with special attention paid to Waterbury residents.

Annual Grants: Two new scholarships per academic year of \$3,000 each. Previous awardees will be funded if they meet the current criteria.

Please indicate here if you are applying for this scholarship.

The Janet and Alan Hertzmark College Scholarship:

Eligibility: Jewish undergraduate students accepted or attending an accredited undergraduate college/university.

Qualifications: Strong academic record.

Residency requirements: The state of Connecticut.

Annual Grants: One scholarship per academic year of up to \$1,000. Previous awardees will be reconsidered.

Please indicate here if you are applying for this scholarship.

The Shobhna Shukla and Matthew Ginsburg College Scholarship:

Eligibility: post-high school students accepted or attending any accredited technical school, undergraduate college/university, or graduate or post-graduate program.

Qualifications: Financial need, on a non-discriminatory manner as to race or religion.

Residency requirements: Waterbury.

Annual Grants: Two new scholarships per academic year of up to \$3,000 each. Previous awardees will be reconsidered.

Please indicate here if you are applying for this scholarship.

***A Completed Scholarship Application Includes Ten Copies Of Your Signed Application,
One Official Transcript and Two Letters of Recommendation. Personal Information***

Name: _____

Address: _____

City, _____ State, _____ Zip: _____

Telephone #: _____

Age: _____

Marital Status: single married

List of dependents in family by age (excluding self)

	Name	Age
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

Family Heritage:

Mother: _____ Father: _____ Self: _____

Financial Information – Anticipated Cost of One Year of Education

Tuition \$ _____

Room and Board \$ _____

Textbooks \$ _____

Supplies \$ _____

Transportation \$ _____

Other Expenses \$ _____

Total Anticipated Cost \$ _____

Expected Family Contribution from FAFSA Score (NOTE: EFC is required to be eligible for consideration)

Anticipated Financial Resources

Parent Contribution	\$ _____
Work Study Income	\$ _____
Student Loans	\$ _____
Confirmed Grants	\$ _____
Confirmed Scholarships	\$ _____
Summer job	\$ _____
Part time employment	\$ _____
Other Source(s)	\$ _____
Total Resources	\$ _____

Outstanding Loans

Total: _____

Anticipated Need this school year

Total: _____

Will you be applying for other scholarships/grants?
If yes, please list here with possible award amounts:

1. _____
2. _____
3. _____

Academic Information

Status – check appropriate box and complete requested data

- Entering College Freshman – provide your High School's name
- Continuing Undergraduate Studies please state your major and year you expect to graduate
- Other

If entering freshman, please list the institutions to which you have applied in priority order. Place an asterisk next to those to which you have been accepted:

- 1.
- 2.
- 3.
- 4.

List any academic honors and awards received:

List organizations, activities, offices in which you have been active:

If the amount of any award granted to me by this scholarship is in excess of my need, the overage will be returned. To the best of my knowledge, the above information is true and accurate.

Signature: _____ Date: _____

Date: _____

Signature of Parent or Guardian
(if under age 18):

The committee desires a carefully and thoughtfully prepared essay to be completed annually. Please provide an essay (500 words or less) to introduce yourself to the committee, sharing a sense of your interests, goals, values, and achievements:

The Committee requires two letters of recommendation, one academic, and one personal. In order to be considered for any scholarship, the letters must be postmarked no later than April 15, 2010. Please complete two of the following form and give to the persons making the recommendations for you.

LETTER OF RECOMMENDATION

(Please type only)

To the Applicant:

I, _____

hereby request _____ to complete a recommendation letter for me.

Note: I am aware of the rights afforded me by the Federal Educational Rights and Privacy Act of 1974, as amended, and hereby waive my rights to examine the contents of this letter, provided that it is used solely for the purposes for which it was requested.

IF YOU DO NOT CHOOSE TO WAIVE YOUR RIGHTS, DO NOT SIGN THIS WAIVER.

Applicant's Signature: _____ Date: _____
(Type below)

Instructions for the Recommender:

This Letter of Recommendation must be postmarked and sent to the Foundation – Jewish Communities of Western CT, Inc., 444 Main Street North, Southbury, CT 06488, no later than April 1st. Failure to meet this deadline may make this student ineligible for a scholarship. If the student does not sign the Waiver Statement, this letter may not be confidential. Please type your evaluation of the above-named student identifying his/her contributions to the high school, college, university, and/or community, referring to one or more of the following categories: scholarship, leadership, character, service. Please use your own letterhead, and staple your letter to this form.

Name of Recommender Recommender's Address (Area Code) Phone #

Signature of Recommender Recommender's Title/Position