

Yeshiva Scholarship Form

Please print, fill this out.

Delivery: Fax to 416.222.7812

Or drop off at the office 5987 Bathurst St.

1. Please describe in 200 words why you want to go to study.

2. By receiving a scholarship you will be taking from the community, what will you give back after your return?

3. In which country do you want to study? USA / Israel / Other

4. If you chose Israel, answer the following 2 questions:

- a. How long would you like to study for? _____
- b. What would you like to accomplish in your studies?

5. General information – Please fill out.

First Name: *

Last Name: *

Gender: *

Age: *

How did you hear about this program?

 *

When do you plan on coming to learn in Israel?

 *

When do you plan on leaving Israel?

 *

If you are coming
Israel on an
organized trip
please specify
which one?

*

What plans do you
have when you
return from Israel?

*

**PERSONAL
CONTACT
INFORMATION:**

Address:

*

City

*

State

*

Telephone:

*

Your Email (This
email will be the one
you will be contacted
through!):

*

**FAMILY
BACKGROUND:**

Was your mother
born Jewish?

*

If not, please
summarize
conversion history
if any:

Was your father
born Jewish?

If not, please
summarize
conversion history
if any:

**JEWISH
BACKGROUND:**

What Jewish
Education have
you had?

*

If you attended
afternoon Hebrew
School, how many
years did you
attend?

 *

What was the
affiliation of your
Hebrew School?

 *

If you attended
Day School, how
many years did
you attend?

 *

What was the
affiliation of your
Day School?

 *

Your current
Jewish Affiliation:

 *

If you specified
"Other" please
explain:

Have you been to
Israel before?

 *

Please explain the
nature of your
former trips:

 *

**SCHOOL
INFORMATION
AND
EDUCATIONAL
BACKGROUND:**

Elementary
School, name and
location :

 *

High School,
name and location
:

 *

University/College,
name and location

:

Current status:

EMPLOYMENT INFORMATION

Job title:

Add a Photo of
yourself: *
