



2475 West Atlantic Ave  
Delray Beach, FL 33445

Rabbi Aviva Bass  
Cantorial Soloist Margaret Schmitt  
Religious School Director  
Dr. Rivkah Felsher

## **I. Eligibility**

A. Applications will be considered for a merit/need based scholarship based on the following:

1. Religious School Attendance
2. Participation in religious school events
3. Participation in Temple Sinai Youth Group (TaSTY)
4. Applicants are to meet erev-Shabbat and Shabbat service requirements
5. Class behavior, class participation, and academic achievement

B. Parent/parents must be members of Temple Sinai and membership must be in good standing

C. Parent(s), on behalf of their child, may apply for a scholarship to a recognized URJ Jewish summer camp, day camp, or any other Jewish Experience camp program sponsored by any local, national or international Jewish youth organizations that are recognized and approved by Temple Sinai of Palm Beach County

## **IV. Awarding of Scholarships**

A. Funds for these scholarships have been made possible through an allocation from \_\_\_\_\_

B. Scholarships will be awarded on the basis of merit/need and for the purpose of incentive. The determination as to the amount of money awarded will be done on an individual basis, based on all of the above criteria.

C. In the event that the scholarship is awarded and the child does not participate in the program, the award is to be returned to Temple Sinai of Palm Beach County. Please direct any questions to David Cotton.

D. Scholarships may be revoked once made if above criteria is not maintained through the remainder of religious school academic period.

Completed application packages should be returned to:

**Temple Sinai of Palm Beach County**  
**Religious School Office**  
**2475 West Atlantic Ave**  
**Delray Beach, FL 33445**

**All Questions should be directed to Religious School Director or Religious School VP's**

1. Name of Applicant: \_\_\_\_\_

2. Address of Applicant: \_\_\_\_\_

3. Applicant lives with Both Parents \_\_\_ One Parent \_\_\_ Guardian \_\_\_ Name: \_\_\_\_\_

4. Applicant's Date of Birth: \_\_\_\_\_ 5. Current school attended: \_\_\_\_\_

Current Grade: \_\_\_\_\_

6. Current Religious school Grade? \_\_\_\_\_ Years attending religious school: \_\_\_\_\_ - \_\_\_\_\_

7. Parent/Guardian Information: Father's Name: \_\_\_\_\_

E-mail \_\_\_\_\_

Address (if different from the above): \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

Mother's Name: \_\_\_\_\_ E-mail \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

8. Has applicant previously participated in an approved Israel summer program, a year-long study program in Israel, a domestic Jewish summer camp program or any other Jewish/Israel educational experience program? YES: \_\_\_ WHEN: \_\_\_\_\_

PROGRAM(S): \_\_\_\_\_ YES: \_\_\_ WHEN: \_\_\_\_\_

PROGRAM(S): \_\_\_\_\_ YES: \_\_\_ WHEN: \_\_\_\_\_

PROGRAM(S): \_\_\_\_\_ NO: \_\_\_

9. Extra-curricular activities (Jewish and secular)

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

10. Jewish Summer Camp Name Applying to: \_\_\_\_\_

Address of program: \_\_\_\_\_

Start Date of program: \_\_\_\_\_ Application deadline for program: \_\_\_\_\_

11. Cost of program: \$ \_\_\_\_\_ Deposit required: \$ \_\_\_\_\_

Final payment deadline \_\_\_\_\_ 12. Parents will contribute: \$ \_\_\_\_\_ toward the cost of the program.

13. What extenuating circumstances should be considered when processing this application? (Loss of income, family dynamic, and health issues, etc.)

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