



**Jewish Federation**  
OF DELAWARE

JEWISH FUND FOR THE FUTURE

101 Garden of Eden Road, Wilmington, DE 19803

www.ShalomDelaware.org

## Joseph & Marion Greenbaum Scholarship Application

Students pursuing an undergraduate degree at an accredited college or university.

For Academic Year Beginning: 2019-20

**PLEASE COMPLETE ALL SECTIONS**

### Section I – Student Information

|                                         |  |                                           |              |                 |  |
|-----------------------------------------|--|-------------------------------------------|--------------|-----------------|--|
| <b>Last Name</b>                        |  | <b>First Name</b>                         |              | <b>Middle</b>   |  |
| <b>Permanent Address</b>                |  | <b>City</b>                               | <b>State</b> | <b>Zip Code</b> |  |
| <b>Current (if different) Address</b>   |  | <b>City</b>                               | <b>State</b> | <b>Zip Code</b> |  |
| <b>Religious Affiliation (optional)</b> |  | <b>Congregation/City/State (optional)</b> |              |                 |  |
| <b>Best Phone</b>                       |  | <b>Best Email</b>                         |              |                 |  |

Please list prior support you *received* or *requested* from the Jewish Federation of Delaware for camp, Israel experience or other programs. **Use additional sheet if necessary.**

| Name of Program | Date Applied | Amount Requested | Received: Yes / No / Waiting |
|-----------------|--------------|------------------|------------------------------|
|                 |              |                  |                              |
|                 |              |                  |                              |
|                 |              |                  |                              |

**Section II – Academic Information (as applicable)**

|                                                                                                                                             |                                    |        |            |
|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------|------------|
| Name/Address of School Currently Attending                                                                                                  |                                    |        |            |
| Expected Graduation Date                                                                                                                    |                                    |        |            |
| Cumulative Grade Point Average                                                                                                              |                                    |        | GPA as of: |
|                                                                                                                                             |                                    |        |            |
| What is your intended:                                                                                                                      | College Major                      | Career |            |
|                                                                                                                                             |                                    |        |            |
| If in High School, Name/Address of 1st choice of college/university. The school must be accredited or licensed (include acceptance letter.) |                                    |        |            |
|                                                                                                                                             | Total cost of attendance per year: |        |            |
| If you are waiting to be notified, please list name/city/state of your next 3 choices of colleges or universities.                          | 2.                                 | 3.     | 4.         |

**Section III – Community service, extra-curricular activities, work experience, awards & honors Use additional sheet, if necessary.**

**Community Service activities:** Please list your involvement outside of school with nonprofit, community, civic and/or faith-based organizations for the past 3 years only.

| Name of Organization | Dates (from/to) | Average hours per month | Activities / Positions |
|----------------------|-----------------|-------------------------|------------------------|
|                      |                 |                         |                        |
|                      |                 |                         |                        |
|                      |                 |                         |                        |
|                      |                 |                         |                        |

**Extra-curricular activities:** Please list any school leadership experiences over the past 3 years, including clubs and sports.

| Name of Organization | Dates (from/to) | Average hours per month | Activities / Positions |
|----------------------|-----------------|-------------------------|------------------------|
|                      |                 |                         |                        |
|                      |                 |                         |                        |
|                      |                 |                         |                        |

**Honors and Awards:** Please list any honors or awards you have received in the past 3 years

| Name of Award | Date Received | Reason for Award | Presenting Organization |
|---------------|---------------|------------------|-------------------------|
|               |               |                  |                         |
|               |               |                  |                         |
|               |               |                  |                         |

**Work Experience:** Please list any internships or work experience over the past 3 years.

| Name of Business | Dates (from/to) | Average hours per month | Position / Responsibilities |
|------------------|-----------------|-------------------------|-----------------------------|
|                  |                 |                         |                             |
|                  |                 |                         |                             |

**Section IV – Financial**

|                                                                                                         |                                                                    |
|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| Have you completed Free Application for Federal Student Aid (FAFSA)?<br>Yes ( )                  No ( ) | If so, what is your expected family contribution? (Optional)<br>\$ |
|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|

*In the space below, please describe your financial need.*

Please list **ALL** financial aid, grant or scholarships amounts you have received or applied for the 2019 – 2020 academic year along with the granting organization. **Use additional sheet, if necessary.**

| Name of Organization | Date Applied | Received: Yes, No or Waiting | Amount |
|----------------------|--------------|------------------------------|--------|
|                      |              |                              |        |
|                      |              |                              |        |
|                      |              |                              |        |

**Section V – Letters of Recommendation**

*Must provide two (2) letters of recommendation. One letter should be from a teacher, counselor or employer. Application will be considered incomplete without both letters of recommendation.*

| Name of Reference | Relation | Organization (if applicable) |
|-------------------|----------|------------------------------|
|                   |          |                              |
|                   |          |                              |

**Section VI – Personal Statement**

*In the space below, please describe your educational and career goals.*

## Section VII – Signature

If under Age 18, a parent or guardian's signature is also required.

The undersigned applicant hereby consents and agrees, or if under age 18 the undersigned parent(s) or natural guardian(s) hereby consent and agree individually and on behalf of the child or ward and represent that he/she are, in fact, acting in such capacity, to waive any confidentiality with respect to the above information with the understanding that this information will be used by the Jewish Federation of Delaware's Selection Committee and employees for the purpose of evaluating the applicant to receive a scholarship. If the applicant is selected to receive a scholarship, permission is hereby given for the Jewish Federation of Delaware to publish the applicant's name and photos.

Further it is agreed to release and hold harmless the Selection Committee and the Jewish Federation of Delaware, its agents and employees for any defect in or lack of capacity by the undersigned to act on behalf of the minor, or for any acts, neglects or defaults of any volunteer or any person employed by the Committee or by the Federation selected with reasonable care, or for any error in judgment, or any act done or steps taken or omitted, or done on the advice of counsel, for any mistakes of facts of law, or for anything the Committee or Federation may do or refrain from doing in good faith.

The information on this application is true and complete to the best of my/our knowledge.

The applicant plans to complete the intended course of study for which he/she is requesting a scholarship.

|                          |             |
|--------------------------|-------------|
| <b>Student signature</b> | <b>Date</b> |
|--------------------------|-------------|

|                                          |             |
|------------------------------------------|-------------|
| <b>Parent(s) / Guardian(s) signature</b> | <b>Date</b> |
| _____                                    | _____       |
| _____                                    | _____       |

## Section VIII – Parent(s) / Guardian(s) Contact Information

|                   |               |                   |              |                     |
|-------------------|---------------|-------------------|--------------|---------------------|
| <b>First Name</b> | <b>Middle</b> | <b>Last Name</b>  |              |                     |
| <b>Address</b>    |               | <b>City</b>       | <b>State</b> | <b>Zip Code</b>     |
| <b>Best Phone</b> |               | <b>Best Email</b> |              | <b>Relationship</b> |

|                   |               |                   |              |                     |
|-------------------|---------------|-------------------|--------------|---------------------|
| <b>First Name</b> | <b>Middle</b> | <b>Last Name</b>  |              |                     |
| <b>Address</b>    |               | <b>City</b>       | <b>State</b> | <b>Zip Code</b>     |
| <b>Best Phone</b> |               | <b>Best Email</b> |              | <b>Relationship</b> |

## JFF SCHOLARSHIP SELECTION CRITERIA

The selection of scholarship recipients, the number of scholarships awarded each year, the amount of each award and all the details thereof are the sole discretion of the Jewish Federation of Delaware. The Federation will not be under obligation to distribute funds if no suitable candidates are found in a given period of time.

It is your job to ensure that the application is complete, neat, all questions are answered and all required documents are delivered (including letters of recommendation). Selection will be made without regard for race, color, national origin, age or sex of candidate.

Criteria considered by the scholarship selection committee when reviewing your application include the following:

- **Resident of Delaware or surrounding communities** The Jewish Federation of Delaware's service area may be considered by the committee.
- **History of Giving** – Committee many consider your (and family) community support and involvement
- **Tikkun Olum (Repairing the World) & Tzedakah (Justice)** Committee members may look for evidence of how you practice Jewish values through volunteerism and service. Committee members may be interested in the role you have played in your community or synagogue.
- **Leadership** Committee members may consider your extra-curricular activities or work experience and look for a range of leadership roles within the Jewish or general community.
- **Academics** Committee members may review if you have won special award(s) or received any honors. They may look at your academic accomplishments. They may assess your goals and how you plan to accomplish them.
- **Creativity** Committee members may be interested in your creative abilities. They may look to see if you are involved in the arts or sciences. They may view how resourceful you are and ways you have been able to apply it.
- **Special Circumstances** It is important to let the committee know if you have a strong financial need or have overcome an obstacle to achieve your goals or encountered special situations.
- **Other Requirements** Review the criteria to make sure you qualify and you meet the scholarship criteria. The Joseph and Marion Greenbaum Scholarship requires you to be a full-time student pursuing an undergraduate degree at an accredited college or university.

## **APPLICATION INSTRUCTIONS**

1. Applications must be legible *or will not be considered*. Please write neatly.
2. Complete all sections, utilize additional sheets if necessary.
3. Applicants **must** include a personal statement reflecting their interests and qualifications
4. Must include two letters of recommendations or application will be incomplete and ***will not be considered***.
5. Applications may be submitted on line or downloaded and mailed.
6. **Do not** submit any personal financial information, tax returns, etc.

## **CHECK LIST**

- \_\_\_ Make sure all sections are completed.
- \_\_\_ Attach college or university acceptance letter (if applicable).
- \_\_\_ Two letters of recommendation. These may be included or sent separately. If send separately it is the student's responsibility to follow up on receipt of letters. If emailing, please send to [Scholarships@ShalomDel.org](mailto:Scholarships@ShalomDel.org).
- \_\_\_ Sign the application. If under age 18, also must be signed by parent(s) or guardian(s.)
- \_\_\_ Paperclip the application pages – **you should not staple or fold your application.**

**Deadline is Friday, March 29, 2019**

**Mail to:**

**Jewish Fund for the Future – Greenbaum Scholarship  
101 Garden of Eden Road  
Wilmington, DE 19803**



## **FREQUENTLY ASKED QUESTIONS**

### **How many scholarships are awarded and what are the amounts?**

The number of awards and amounts vary each year depending on the number of qualified applicants and the funds available. Scholarship awards can range from \$500 to \$3,000.

### **How can scholarship funds be used?**

Scholarship awards are for tuition only and will be made payable to the recipient's college or university. Any unused funds are to be returned.

### **Can I apply for more than one year?**

Scholarships are given for one (1) academic year. Renewal applicants must fill out a new application each year for review by our selection committee. You may continue to apply each year as long as you meet the eligibility criteria.

### **I have several potential school choices. Which one should I list on the application?**

List your first choice on the application. If you are chosen to receive an award from us, it will be your responsibility to make certain our scholarship administrator is aware of your final school choice so that your check can be issued accordingly.

### **What are my responsibilities if I am chosen as a recipient?**

You must remain enrolled for the entire academic year or program period in which the scholarship is awarded. If you transfer to another school or leave your program you must contact us immediately.

### **What other scholarships are available?**

Please visit our website [ShalomDelaware.org](http://ShalomDelaware.org).

### **When is the application deadline and how will I be notified?**

Applications should be received by Friday, March 31, 2019. You will receive a letter notifying you of the status of your application. If you are awarded a grant, you will be requested to respond with the mailing address and student account number of the school where the check will be mailed.

### **Who should I contact if I have additional questions?**

Call (302) 427-2100 or email [Scholarships@ShalomDel.org](mailto:Scholarships@ShalomDel.org)