

JACOBSON JEWISH COMMUNITY FOUNDATION
JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY
Linda Berey Hurst "Chai" Fund for Jewish Life

Dear Student:

Thank you for applying for a grant from the Linda Berey Hurst "Chai" Fund for Jewish Life at **THE JACOBSON JEWISH COMMUNITY FOUNDATION (JJCF)**.

Linda Berey Hurst, Z"l, was a beloved member of our community who lived every day with passion. She had a deep commitment to Jewish life in South Palm Beach County, where she was devoted to helping the community grow and to ensuring a bright future. In her memory, Linda's family established a fund to ensure that Jewish children have access to quality immersive Jewish experiences, such as Jewish overnight camp and study in Israel programs. Thanks to the generosity of Linda's family and many friends, we are pleased to provide a limited number of scholarships to Jewish students living in South Palm Beach County, Florida (Boca Raton, Delray Beach and Highland Beach).

Please note: Applying does not guarantee you will receive funding, as our limited funds may impede granting of scholarships.

SCHOLARSHIP ELIGIBILITY

- Only students whose primary residence is within South Palm Beach County (Boca Raton, Delray Beach and Highland Beach) are eligible to receive financial assistance from the Jacobson Jewish Community Foundation.
- Scholarship dollars must be used within the time frame and for the purpose for which it was intended.
- Scholarship checks will be made in the name of the institution and mailed directly to the institution.
- After 2 years of receiving scholarship, third year applicants may be placed on a waitlist, as funds may be prioritized for first and second year participants. Third year and beyond applicants may receive scholarship if funds are available.
- Scholarship may only be used for the child to whom the funds were awarded.

SCHOLARSHIP PROCESS

To apply for funding, please submit the Grant Application Form along with the following items:

- ✓ A typed letter from the **student** (no more than one page) describing why you would like to participate in this experience. You may include information about your Jewish community involvement, family history and objectives. Please indicate financial need and disclose any financial aid/scholarships you are receiving or may receive from other sources. Parents may also write a letter if they choose.
- ✓ Itinerary and breakdown of costs from the institution.
- ✓ 2019 Tax Returns
- ✓ All parts must be submitted via email as a Word document or PDF; or hard copy in the mail. **DO NOT SEND AS A JPG.**
- ✓ **DEADLINE: January 15, 2021. Any applications received after this date will be put on a waiting list in the event funds become available.**

Note: Incomplete applications, including lack of sufficient documentation requested and omissions or untruthful statements will not be considered for funding. All information must be current and accurate. If you have questions or to check the status of a scholarship request, please contact:

Jacobson Jewish Community Foundation
9901 Donna Klein Blvd.
Boca Raton, FL 33428
Lottie Nilsen, CFRE, Associate Vice President, Foundation Development
PH: 561-852-3109 Fax: 561-852-3150
Email: lottien@bocafed.org

JACOBSON JEWISH COMMUNITY FOUNDATION
Linda Bery Hurst "Chai" Fund for Jewish Life
REQUEST FORM *If not legible, this application will be rejected.*

Student name _____ Date of birth _____

Home address _____ City _____ State: _____ Zip code _____

Mailing address _____ City _____ State _____ Zip code _____

Home phone _____ Cell phone _____ E-mail _____
(If different from home)

Parent(s)/Guardian name _____

City _____ State _____ Zip code _____ Phone _____ Rent Own

(Please check one)

Name of Institution/Camp/Organization _____

US Mailing address and website _____

Program start date and duration _____ Total Cost of Program and Transportation _____

Sibling names and ages _____

Synagogue affiliation, if any _____

Jewish community involvement *(in or out of school)* _____

Volunteer experience _____

Israel experiences *(please indicate if through a program or through family, and dates)* _____

Please indicate all forms of financial assistance you are receiving to attend this program and scholarship amount

Referral source _____

(Print ad, website, other organization, student, etc.)

Were you awarded Hurst scholarship funds in 2020 that you were not able to use due to COVID-19? _____

It is valuable for members of the Jewish Federation of SPBC and the Jacobson Jewish Community Foundation to hear about your sponsored experience in camp and/or Israel. Would you be willing to speak at a local meeting or event after you return to the community?

YES No

Please Note: The undersigned hereby attests that the information provided is current and accurate. Fraudulent information may cause this application and all future requests to be rejected by the Jacobson Jewish Community Foundation Scholarship Committee.

Student Signature

Parent/Guardian Signature

Date