Dear Scholarship Applicant,

The National Council of Jewish Women is pleased to make available a **scholarship** to a deserving college student who is pursuing a teaching career.

Below are the specific eligibility requirements:

The applicant must be female attending a college in Palm Beach County. She must have the character traits of a good teacher and an affinity towards working with children.

The applicant must submit her high school transcript and college transcripts, questionnaires, and two evaluation forms to: NCJW, c/o Mrs. Sandra Hendrick, 7829 Kinglsey Palm Terrace, Lake Worth, FL 33467.

All parts of the application packet must be received by April 16<sup>th</sup>. The recipient will be notified on April 18<sup>th</sup>.

The winner must be able to attend an Awards Breakfast at 9:15 am on Wed., April 29, 2009, at the Villagio Social Hall, 6935 Via Bernada, Lake Worth (East of Lyons and Hypoluxo Rds.) The recipient will be expected to speak for about two minutes about her past and her future goals. She will be able to bring one guest with her.

Wishing you the best, I am

Sincerely yours,

## Sandra Hendrick

Scholarship Committee Member National Council of Jewish Women

# **Scholarship Application Applicant Data**

Name: Last	First	MI			
Address:					
City	State	Zip			
Residence Phone	Cell Phone	E-Mail Address			
Date of Birth: Month/Day/	Year				
	<u>School</u>	l Data			
College Name	Phone Number				
School Address: Street					
City, State	, Zip				
Cumulative Grade Point A	verage:Credits Comp	leted H.S. Grade Point Averag	e		
Career Goal					
Name and Address of H.S.	Attended				
Discuss how your voluntee	er or paid work experiences h	nave contributed to your developme	nt.		

**Scholarship Application** Provide the information below in essay form. If you need more space, use the back of this paper and label accordingly. 1. Why do you feel the committee should choose you for the scholarship? 2. Describe how and when any unusual family or personal circumstances have affected your ability to achieve in school, employment, or community services. 3. Please describe any special circumstances that may affect your family's ability to pay for college (medical, divorce, unemployment, child support, other). 4. Explain what contributed to your decision to pursue a teaching career. 5. Mention any other information you would like the committee to consider.

#### **Applicant Evaluation**

To be completed by advisor, instructor, supervisor, coach or clergyman who knows the applicant well.

You have been asked to provide information in support of this scholarship application. Please give immediate and serious attention to the following statements.

Applicant's Name:	Evaluator's name	Title
Evaluator's phone #	Relationship to applicant	
Appraiser's Business Address		
	cant should receive a scholarship?	
	should be a teacher?	
Signature of Evaluator_	Dat	

List awards and honors you have received and briefly explain their significance. Attach an additional sheet if

**Dates of Involvement** 

**Hours per Month** 

**Honors and/or Position Held** 

Applicant Name

necessary.

SCHOOL INVOLVEMENT

Activity

COMMUNITY/RELIGIOUS INVOLVEMENT

necessary.					
Activity	Honors and/or Pos	ition Held	<b>Dates of Involvement</b>	Hours per Month	
AWADDC AND HONOR	<u>с</u>				
AWARDS AND HONOR		d briefly over	lain their significance. Atta	ah an additional	
sheet if necessary.	iors you have received and	a offerry exp	iam men significance. Au	ich an additional	
Award/Honors		Significance		Date Received	
Awaru/Honors		51	Smireance	Date Received	
EMPLOYMENT					
Beginning with your prese				T	
Employer	Position	Da	ates of Employment	Hours per Week	