

Greensboro Jewish Federation Youth Programs and Educational Experiences Fund *Policies - Application - Release from Liability*

Grant Funding Objectives:

The purpose of this grant is to provide funding for Greensboro area teens to attend domestic Jewish youth or Israel advocacy programs. The Greensboro Jewish Federation has a commitment to supporting the next generation of Jewish leaders.

Federation will generally provide $\frac{1}{3}$ of total costs of participation in a qualifying youth program or educational experience, up to a \$300 subsidy per participant, per grant. *Students are eligible to receive a grant once per school year, up to four times during high school, and once again in college. Circumstances may be evaluated on an as needed basis.*

Qualifying Criteria for Domestic Programs Include:

This program centers around Jewish youth leadership content, including one of the themes below:

- Advocacy
- Cultural or religious experience
- Social action; Bringing together Jewish teens (social component)
- Leadership development
- Is a nationally/regionally recognized program (*examples: L'Taken, BBYO, Club Z, etc.*)

Funding Qualification Checklist:

- My guardian and/or I have contributed to this year's annual campaign and am a member in good standing of the Greensboro Jewish Federation (all pledges from the current and prior campaigns must have been paid).
- I will use this grant in the school year (August 1–July 31) it is awarded for a program which has been approved by the Greensboro Jewish Federation. The grant must be applied in full to a single program and cannot be divided among multiple programs.
- I am committed to participating in two hours of community service for the Greensboro Jewish Federation per grant received. Through this, I intend to demonstrate a responsibility to our community.
- I agree to share a reflection upon my return, which may include an article for *Shalom Greensboro* magazine, a blog post for the website, a creative writing piece, or another format, if requested.

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Application: *All information will be kept confidential*

Personal and Family Information:

Name of Applicant: _____

Address: _____

Email address: _____ Cell phone: _____

Date of birth: _____ Current grade in school: _____

Congregational Affiliation (if any): _____

Parent/Guardian Name: _____ Parent/Guardian Name: _____

Occupation: _____ Occupation: _____

Address: _____ Address: _____

Phone #: _____ Phone #: _____

Email: _____ Email: _____

My parent(s) or guardian(s) is/are a member of the Greensboro Jewish Federation: YES / NO (circle one)

Other dependents of parent/guardian: List Name(s), Age(s), and Relationship:

Greensboro Jewish Federation Youth Programs and Educational Experiences Fund Application continued

Trip Information:

Please check this box if you are attending a L'Taken, AIPAC or BBYO program.

Organization: _____

Name of Program: _____

Address: _____

Phone #: _____ Website: _____

Dates: From _____ to _____

Cost: (include cost charged by trip provider) \$ _____

- Along with this application, please submit a brief essay of up to 150 words on why you want to participate in this program, and how you plan to fulfill your community service commitment.

All the information on this application is true and complete to the best of my knowledge.

Applicant's Signature

Date

Parent/Guardian Signature

Date

