

# BETH EMET SYNAGOGUE

## LEO BAECK MERIT SCHOLARSHIP APPLICATION

**FINAL DEADLINE FOR SUBMISSION: NOVEMBER 12, 2007**

Return fully completed application materials by U.S. mail or by hand to:

Beth Emet Synagogue  
1224 Dempster Street  
Evanston, IL 60202  
Attn: Leo Baeck Scholarship

### PLEASE TYPE.

#### I. APPLICANT GENERAL INFORMATION

Name: \_\_\_\_\_

(last)

(first)

(middle)

Sex: M \_\_\_ F \_\_\_ Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Social Security number: \_\_\_\_\_

Home address: \_\_\_\_\_

City and State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

Email: \_\_\_\_\_

#### LIST OF RECOMMENDATIONS (both required)

1. Name of Beth Emet/Jewish Community Recommender \_\_\_\_\_

2. Name of Leadership Recommender \_\_\_\_\_

**APPLICATION CHECKLIST: Please check off and insure that each of the following items is included before returning your application:**

Essay

Activities sheet

First Recommendation

Second Recommendation

School Transcript

## II. APPLICANT INFORMATION

### A. Education. Be sure to indicate your present year in school:

High School: \_\_\_\_\_

Present year: Fr\_\_\_ So\_\_\_ Jr\_\_\_ Sr\_\_\_

### B. Jewish Involvement:

Previous travel to Israel (add extra page if necessary):

Year	Length of stay	Purpose	Sponsoring Organization
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### ATTESTATION FORM

I attest that this application and the other information submitted are true, correct, and complete to the best of my knowledge, and that I completed it by myself. I understand that this is only an application for a scholarship and that there is no guarantee of receiving a scholarship. I understand that receipt of a scholarship is contingent upon acceptance to the program to which I have applied and that failure to complete the program will necessitate repayment of the scholarship.

\_\_\_\_\_  
(Applicant's signature)

\_\_\_\_\_  
(Date)

Signature(s) of parent(s) or legal guardian(s)

\_\_\_\_\_

\_\_\_\_\_  
(Date)

\_\_\_\_\_

\_\_\_\_\_  
(Date)

If you have any questions about this application email: [leobaeckscholar@bethemet.org](mailto:leobaeckscholar@bethemet.org)





---

**Honors and Awards**

Name of award

Granted by

Activity for which granted

Date/academic  
year granted

---

**Work experience**

Type of work

Dates of employment

Hours per week/  
weeks per year**School Year**Hours per week/  
weeks per year**Summer**

Employer

/

/

/

/

/

/

/

/

/

/

---

**Summer activities** including work, camp, summer school, travel, etc. Please note duration and types of experiences away from home and/or family.

---

2004

---

2005

---

2006

---

2007

---

You can add any additional information, which you would like us to know. Use the back of this sheet or add additional pages, but be sure to type the information.