



צעירי בתי הנסות המאוחדים

UNITED SYNAGOGUE YOUTH - HAGALIL REGION

UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM- NEW JERSEY REGION

1090 KING GEORGES POST RD., SUITE 1003, EDISON, NEW JERSEY 08837

TEL: 732-73USY60(738-7960) FAX: 732-738-4304

www. hagalilusy.com

PRESIDENT:

Jonathan Steinberg
בן ג'ון יואל דב הכהן זמנה לאה
יגוע צב'
201-566-5386
JSTEINBERG202@AIM.COM

DIRECTOR OF EDUCATION

AND YOUTH ACTIVITIES
Michelle H. Rich
מלכה זמנה בתי יוסף לב ולאה
E-MAIL: RICH@USCJ.ORG

EXECUTIVE COMMITTEES/ ISRAEL AWARENESS VP:

Oren Fliegelman
אורן נתן בן אברהם זמנה
732-861-6387
ORENFLIEGELMAN@GMAIL.COM

January 2010

Tevet 5770

RELIGION/EDUCATION VP:

Cory Nagelberg
ג'אל בן דוד שלום זמנה גיטל
יוסף ד'
908-616-4956
SUGG22@AOL.COM

Dear Scholarship Applicant:

Enclosed are the full particulars regarding the New Jersey HaGalil Region's Tikun Olam Scholarship Program. All money used for this program is collected through USY's tzedakah project, Tikun Olam.

SOCIAL ACTION/TIKUN OLAM

VP:
Melissa Sperber
מליסה זמנה בתי יוסף ולאה ענדל
201-919-5946
REDHEAD18@OPTONLINE.NET

As many of you know, 30% of all monies raised by our region through Tikun Olam, becomes available for use as scholarship money for the summer programs. Therefore, the amount available for scholarship use varies from year to year. Actual scholarships are awarded by the United Synagogue Regional Scholarships Committee **BASED ON FINANCIAL NEED AND INVOLVEMENT IN USY.**

MEMBERSHIP/ PROGRAMMING VP:

Halli James
ח'לי ג'יימס בתי פנחס ראובן זמנה
צ'ביה
908-456-3277
WEIRDKID18@AOL.COM

So that we may expedite and properly process your request, please follow these steps:

COMMUNICATIONS VP:

Lindsay Steinbach
לינדי סטינבאך בתי שמאל זמנה רחל
908-370-6026
LINZATART100@COMCAST.NET

1. Fill out the enclosed application and return it to this office **NO LATER THAN APRIL 12, 2010**. Appointments with the scholarship committee cannot be made until the completed application is received. This includes the tax information discussed in #2 below. Please note that this application, except for the tax information, must be filled out by you, the USYer, not by parents! Interviews will be scheduled for May 4TH and the 11th if needed- please keep both dates open). This is the only time that the committee is meeting for interviews.

FOR PUBLICITY:
HAGALILPUBLICITY@GMAIL.COM

HONORARY PRESIDENTS

- MARTY CAGAN
- DAVE NOCHIMSON
- MEL SILBERMAN
- WARREN SKLAR
- HARVEY COHEN
- DICK HELLER
- STEVE GARFINKEL
- BILL GLASSNER
- JEFF GUTMAN
- IRV ACKELSBERG
- LARRY ZELNICK
- RICHARD CORMAN
- MARTY UNGER
- ROBERT METH
- ROY SPIEWAK
- ED HUNDERT
- PAUL STEIF
- MANNY HABER
- DAVID LOEWENSTEIN
- ROBIN NOVICK
- JOEL BUCHBAND
- JIMMY GUTERMAN
- SHARYN ROSENBLUM
- ERIC WEINSTOCK
- NORMAN KATZ
- KENNETH WEINSTOCK
- DAVINA ASKIN
- AUREN WEINBERG
- ELLY YOLIN
- ANTHONY KATZ
- DAVID SCHUMAN
- ANDREW YOLIN
- TODD FINE
- ADAM KIMOWITZ
- EITAN GUTIN
- DAVID KIMOWITZ
- BLAYNE ROSS
- DARCI APLEBAUM
- AVI OLITZKY
- RAMI RANK
- RENA KAUFMANN
- JESSE OLITZKY
- ARIELLA GUTIN
- SHAI ROMIROWSKY
- MARK PRUCE
- ZACK WAINER
- JASON STEINBERG
- ELIANA LIGHT
- RAFFI MARK

2. Have your parent(s) answer the financial questions with regard to income and make certain that they return these answers along with a copy of their latest Federal Income Tax Return (a 2008 return may be acceptable) inclusive of all supporting schedules. The tax returns must include copies of W-2 forms, as well as 1099's and supporting documents.

3. You must begin the application procedure for the program of your choice (ie: Wheels, Pilgrimage, etc.), as you would be disappointed to receive a scholarship, only to find your program filled.

4. Your application must include a photo of yourself. We interview many USYers-this helps us to identify those we've met with. It is used strictly for identification purposes.

5. There are many applicants each year and only a limited amount of available funds. All applicants are encouraged to seek assistance from other sources (Synagogue, Rabbi, Federation, etc.).

Over....



6. Return the completed application and have all references sent to my attention at:
HaGalil USY Scholarship Committee
1090 King Georges Post Rd., Suite 1003, Edison NJ 08837

The Scholarship Committee will make thoughtful and reasonable determinations based on the information provided. You are urged to submit a thoughtful, neat and complete application. Please remember that this is a need based scholarship.

If your application meets the criteria, you will be asked to come to the Regional office for a personal interview. This interview is for the USYer (not the parent), and will be held on May 4TH (and the 11th if needed- please keep both dates open). Since interviews are scheduled every fifteen minutes it is imperative that you address any extenuating circumstances without delay. Due to the large number of applicants, please understand that each interview is structured. The applicant will be asked several questions by the committee and then will have an opportunity to address the committee.

You can feel comfortable sharing any information with the members of the committee as it will be held in the strictest confidence. Please note that pursuant to national Tikun Olam policy, there will be at least one USY representative sitting in on your interview. If you are uncomfortable with any member of the committee, please do not hesitate to say so. Should a member of the committee be a member of your synagogue, or an acquaintance of any kind, he or she will be excused from your interview and will not be made privy to your application.

If there is a certain amount of money without which you will not be able to attend your summer program, the committee must be so informed. In situations of demonstrated needs, significant additional monies could be made available to you.

Finally, there are limited funds available and the committee has some very difficult decisions to make. Our objective is to help those USYers who otherwise could not attend a USY summer program, have the opportunity to participate. We will do the very best that we can, but not everyone who applies receives a scholarship.

Applicants will be notified within two weeks of their interview of the committee's decision. You will be informed by mail. Please understand that all funds will be allocated and therefore the decision of the committee will be final.

Finally, all financial information will be held in the strictest confidence. Good luck!

Sincerely,

Sebley Hausler

Sebley Hausler
Chairman, Scholarship Committee

USY SUMMER PROGRAM TIKUN OLAM SCHOLARSHIP APPLICATION

REQUIREMENTS:

1. COMPLETE THE APPLICATION FORM.
2. SUBMIT TWO (2) LETTERS OF RECOMMENDATION (ONE MUST BE FROM YOUR RABBI). THESE SHOULD REFLECT UPON YOUR SPECIFIC SITUATION - YOUR FAMILY, THE TRIP YOU ARE PLANNING TO TAKE, YOUR BACKGROUND, ANY EXTENUATING CIRCUMSTANCES THAT HAVE AFFECTED YOUR FAMILY. THESE LETTERS CAN BE SENT DIRECTLY TO:

SEBLEY HAUSLER
CHAIRMAN, SCHOLARSHIP COMMITTEE
USY
1090 King Georges Post Rd., Suite 1003
Edison, NJ 08837

3. SPECIFIC TO THE SUMMER PROGRAM YOU ARE HOPING TO ATTEND, WRITE AN ESSAY OF 300-500 WORDS, WHY I WOULD LIKE TO GO ON _____. THIS MUST BE SUBMITTED WITH THE APPLICATION. If at all possible, this should be typed.
4. ATTACH RECENT PHOTO TO UPPER RIGHT HAND CORNER OF APPLICATION FORM.
5. ENCLOSE ALL OF THE ABOVE MATERIALS ALONG WITH TAX FORMS, W-2 FORMS AND OTHER PERTINENT INFORMATION NEATLY IN A LARGE MANILA ENVELOPE AND SEND TO:

SEBLEY HAUSLER
CHAIRMAN, SCHOLARSHIP COMMITTEE
USY
1090 King Georges Post Rd., Suite 1003
Edison, NJ 08837

**ALL APPLICATIONS AND RELATED MATERIALS MUST BE IN THE
REGIONAL OFFICE BY APRIL 12, 2010!**

THERE CAN BE NO EXCEPTIONS TO THIS DEADLINE!!

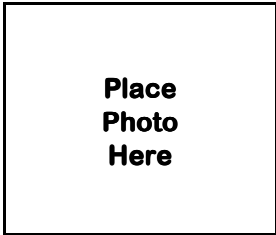
6. THERE WILL BE A MANDATORY PERSONAL INTERVIEW SCHEDULED for May 4th and the 11th if needed- please keep both dates open).

Use this checklist to help you organize your submission...

| | | | |
|------------------------|-----------------------------------|-------------|--------------|
| _____ Application form | _____ Letter of recommendation #1 | | |
| _____ Essay | _____ Letter of recommendation #2 | | |
| _____ Photo | _____ Tax Forms | _____ W-2's | _____ 1099's |

NO APPLICATION WILL BE CONSIDERED WITHOUT COMPLETE FINANCIAL DOCUMENTATION. ALL FINANCIAL DOCUMENTATION MUST ACCOMPANY THE APPLICATION.

NEW JERSEY- HAGALIL REGION
USY
1090 King Georges Post Rd., Suite 1003
Edison, NJ 08837



USY SUMMER PROGRAM TIKUN OLAM SCHOLARSHIP APPLICATION

Program you are applying for (check one):

- | | |
|--|--|
| <input type="checkbox"/> Eastern European Pilgrimage | <input type="checkbox"/> Poland/Israel Pilgrimage |
| <input type="checkbox"/> Israel Adventure | <input type="checkbox"/> Summer In The City |
| <input type="checkbox"/> Israel Adventure Plus | <input type="checkbox"/> USY High |
| <input type="checkbox"/> Italy/Israel Pilgrimage | <input type="checkbox"/> USY On Wheels Classic |
| <input type="checkbox"/> Nativ | <input type="checkbox"/> USY On Wheels/Mission Mitzvah |
| | <input type="checkbox"/> USY On Wheels Pacific Northwest |

PLEASE BE SURE TO ANSWER ALL QUESTIONS

Name: _____ Age: _____

Address: _____

City _____ State _____ Zip code _____ Phone # () _____

E-mail address _____

Parent's Synagogue Affiliation _____ Name of Rabbi _____

High School _____ Current GPA _____ Grade _____

| <u>Hebrew School/Hebrew High School</u> | <u>Dates Attended</u> | <u>Where</u> |
|--|------------------------------|---------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Other Organizational Affiliations (Schools, Teams, Clubs, Youth Groups, Etc.)

| <u>Organization</u> | <u>Years as Member</u> | <u>Position(s) Held</u> |
|----------------------------|-------------------------------|--------------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Please describe your current and prior part time job experiences. (Attach additional page if necessary)

USY INVOLVEMENT

Name of USY Chapter _____

Name of Youth Director and/or Advisor _____

Number of Years in USY _____

Number of years in Kadima _____

Leadership Positions:

| <u>Grade</u> | <u>Chapter Positions Held</u> | <u>Regional Positions Held</u> |
|------------------|-------------------------------|--------------------------------|
| Kadima | _____ | _____ |
| 9 th | _____ | _____ |
| 10 th | _____ | _____ |
| 11 th | _____ | _____ |
| 12 th | _____ | _____ |

International Position(s) held: _____

Regional Activities Attended:

| Grade | LTI | FALL KINNUS | INT'L CONVENTION | MID WINTER KINNUS | SPRING CONVENTION | ENCAMPMENT |
|------------------|-----|-------------|------------------|-------------------|-------------------|------------|
| 9 th | | | | | | |
| 10 th | | | | | | |
| 11 th | | | | | | |
| 12 th | | | | | | |

Religious Preparedness:

| <u>Hebrew Skills</u> | <u>Excellent</u> | <u>Good</u> | <u>Fair</u> |
|----------------------|------------------|-------------|-------------|
| Read | _____ | _____ | _____ |
| Write | _____ | _____ | _____ |
| Speak | _____ | _____ | _____ |

Can you lead services? Please describe below

Family Information

Father's name: _____

Mother's name: _____

Address: _____

Address: _____

Phone #: () _____

Phone #: () _____

Name and address of employer: _____

Name and address of employer: _____

Position: _____

Position: _____

Number of adults in household _____

Number of dependent children: _____

Please list children's names, ages and schools:

- | | | | |
|----|-------|-------|-------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |

Additional Dependents : _____

Please approximate source of funds to finance this trip: YOU MUST COMPLETE THIS PART

| | <u>Amount</u> | <u>Are Funds Committed?</u> | |
|----------------------------|---------------|-----------------------------|-----------|
| | | <u>Yes</u> | <u>No</u> |
| Applicant | \$ _____ | _____ | _____ |
| Parents/Family | \$ _____ | _____ | _____ |
| Synagogue Scholarship | \$ _____ | _____ | _____ |
| USY Tikun Olam Scholarship | \$ _____ | _____ | _____ |
| Federation Scholarship | \$ _____ | _____ | _____ |
| USY Chapter Subsidy | \$ _____ | _____ | _____ |
| Other (Specify) | \$ _____ | _____ | _____ |

Total Cost of Program \$

I certify that all of the information contained within and attached to this application is accurate and true.

 USYer's Signature

 Parent's Signature

 Date

PARENT'S FINANCIAL DISCLOSURE

NO APPLICATION WILL BE CONSIDERED WITHOUT COMPLETE FINANCIAL DOCUMENTATION. ALL FINANCIAL DOCUMENTATION MUST ACCOMPANY THE APPLICATION.

Total annual family income (include all sources)

Please indicate below (or on a separate sheet) any extenuating circumstances you feel may be relevant to the Scholarship Committee of the Regional Youth Commission in evaluating your child's scholarship application.

Please note that no application will be considered without two letters of recommendation, the applicants essay and a signed copy of the parent's latest Federal Income Tax return, including W-2 forms and any applicable schedules.

I certify that all of the information contained within and attached to this application is current, accurate and true.

Parent's Signature

Date