



# JILL TAGER SCHOLARSHIP FUND

To benefit families of Beth Ami Community Nursery School



|   |    |  |    |
|---|----|--|----|
| Parent 1 Name   |    | Parent 2 Name  |    |
| Address (Street)  |    | Address (Street)   |    |
| Address (City, St Zip)  |    | Address (City, St Zip)   |    |
| Phone Number(s)   |    | Phone Number(s)  |    |
| Current Occupation  |    | Current Occupation   |    |
| If less than one year or unemployed – Previous Occupation:  |    |  |    |
| Child's Name  |    | Class Enrolled   |    |
| Total Children in House   |    | Ages/School Attending  |    |
| Amount requesting   | \$ | Amount currently paying  | \$ |
| Would you use the requested amount to a. add more days or b. assist in paying current tuition?  |    |  |    |
| <b>Applications Accepted By:</b>  |    |  |    |
| <b>Fax or E-mail:</b><br>(707) 360-3031 or ns@bethamir.org<br>Subject Line:<br><b>Attention: Jill Tager Scholarship Fund</b>  |    | <b>Mail:</b><br>Beth Ami Community Nursery School<br>4676 Mayette Ave.<br>Santa Rosa, CA 95405 |    |
| <b>Application Requirements</b>   |    |  |    |
| <b>Required Documentation</b>   |    |  |    |
| <ol style="list-style-type: none"> <li>Letter of Hardship: Please supply us with information explaining <i>why</i> you are applying for this scholarship and how it would affect you if you receive it. Include information about your job/work situation, family specifics, health items, etc. that apply to your situation.</li> <li>Paycheck stubs for the last 2 months for <i>anyone</i> working in the home.</li> </ol> |    |  |    |
| <b>Qualifications and Criteria</b>  |    |  |    |
| <ul style="list-style-type: none"> <li>Must be a currently enrolled student</li> <li>Application and required documentation must be <b>completed and turned in by Monday, July 2.</b></li> <li>Once you are notified of any funds allocated, please send a Thank You note to <b>Trustees, Jill Tager Scholarship Fund, Congregation Beth Ami</b> at the address above within 2 weeks of notification.</li> </ul>              |    |  |    |
| <b>Information about the application form</b>   |    |  |    |
| <ul style="list-style-type: none"> <li>One applicant (child) per form</li> <li>All family information must be completed. If an area does not apply, please mark it as N/A</li> </ul>  |    |  |    |
| <i>Your application will be held in the strictest of confidentiality and discretion. Please feel comfortable speaking with Robyn or Caroline if you have questions or need additional information.</i>  |    |  |    |
| Reviewed By:  |    | Date:  |    |
| Approved By:  |    | Date:  |    |