Temple Shalom Youth Scholarship Application Form

Youth Applicant Information			
Name	DOB		
Address			
Best Email	_		
Parent 1 Name	Parent 2 Name		
Sibling (names and ages)			
Program/Event Information			
Program/Event to which you are applying?	Date of Program/Event		
Have you previously attended this program/event?			
One Happy Camper GFC First Tir Dallas Federation Israel Scholarships Other sources from which you will seek scholarships/g	JCRS		
Indicate the Program/Event Fee, Proposed Family Co	mmitment amount, and specific amount requested. Proposed Family Temple Scholarship		
Name of Program/Event Program/Event Fee	Commitment	Request	
\$	\$	\$	
Temple Shalom Scholarships are allocated based on d process, please help us understand your need for this			
Signature of Parent	Date		
Signature of Youth	Date	Date	
Please return this complete form in an envelope mark David Lamden, Executive Director Temple Shalom 6930 Alpha Road	ed " <mark>Confidential</mark> " addresse	d to:	

Or send it as a PDF and email it to: dlamden@templeshalomdallas.org.

Deadline for receipt is January 31, 2024

Dallas, TX 75240