

**MEYER W. GASNER/JOE BERMAN EDUCATIONAL SCHOLARSHIP FUND**  
**APPLICATION FOR THE 2010- 2011 ACADEMIC YEAR**

Please Type or Print Legibly

Should you require more space, please attach additional sheets.

**1. PERSONAL INFORMATION:**

Name \_\_\_\_\_

Present Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ E-mail \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth    D    M    Y S.I.N. \_\_\_\_\_

Place of Birth \_\_\_\_\_

*City*

*Country*

Are you living with your parents?  Yes  No

**2. FAMILY INFORMATION:**

FATHER'S name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_

Father's Occupation \_\_\_\_\_

Father's Employer (*name, address & telephone number*) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

MOTHER'S name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (      ) \_\_\_\_\_ Cell (      ) \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Mother's Employer (*name, address & telephone number*) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (      ) \_\_\_\_\_ Fax (      ) \_\_\_\_\_

SIBLING(S) (*number & ages*): No. \_\_\_\_\_ Ages \_\_\_\_\_

Indicate the school(s) your sibling(s) currently attend(s): \_\_\_\_\_

\_\_\_\_\_

**3. MARITAL INFORMATION:**

Marital Status \_\_\_\_\_

If married, SPOUSE'S name \_\_\_\_\_

Spouse's Occupation \_\_\_\_\_

Spouse's Employer (*name, address & telephone number*) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (      ) \_\_\_\_\_ Fax (      ) \_\_\_\_\_

CHILDREN (*number & ages*): No. \_\_\_\_\_ Ages \_\_\_\_\_

If you have children, are they living with you?     Yes     No

**4. EDUCATIONAL BACKGROUND:**

Hebrew School \_\_\_\_\_

Last grade completed \_\_\_\_\_ Year \_\_\_\_\_

Grade Point Average achieved \_\_\_\_\_

\* High School \_\_\_\_\_

Last grade completed \_\_\_\_\_ Year \_\_\_\_\_

Grade Point Average achieved \_\_\_\_\_

**\* Please note: To be eligible, applicants must possess an Ontario Secondary School Diploma (OSSD), CEGEP Diploma (Collège d'Enseignement Générale et Professionnelle) or their provincial equivalent.**

University \_\_\_\_\_

Degree achieved \_\_\_\_\_ Year \_\_\_\_\_

Grade Point Average achieved \_\_\_\_\_

In the current academic year, where are you registered?

\_\_\_\_\_ *School* \_\_\_\_\_ *City* \_\_\_\_\_ *Country*

Course Description \_\_\_\_\_

Year in Course \_\_\_\_\_ Grade Point Average \_\_\_\_\_

If you have been out of school for a year or more, how have you spent the intervening time? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any scholarships, bursaries, honours, prizes attained (Indicate year received, amounts and organizations):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. WORK EXPERIENCE:**

Present Employment (*if applicable: name, address and telephone number*) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Type of Work \_\_\_\_\_

Previous Employment:

Position \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Position \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Position \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

6. DO YOU PLAN A CAREER IN JEWISH EDUCATION?  Yes  No

7. FUTURE STUDY PLANS:

Where do you plan to register in the coming academic year?

\_\_\_\_\_ *School* *City* *Country*

Course Description \_\_\_\_\_

Year in Course \_\_\_\_\_ Start Date \_\_\_\_\_

Please describe the course you will be taking and indicate whether the program of study is at the undergraduate, master or doctoral level:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. FINANCIAL INFORMATION:

|  |                 |          |
|--|-----------------|----------|
| Total Cost of Course ( <i>Canadian dollars</i> ) | Tuition Fees    | \$ _____ |
|  | Travel Costs    | _____    |
|  | Living Costs    | _____    |
|  | Other (specify) | _____    |
|  |                 | _____    |
|  |                 | _____    |
|  | Total           | \$ _____ |

Please provide details on **all scholarships anticipated, applied for or awarded, or other financial assistance.** Use an extra sheet of paper, if needed.

| Funding Source | Status | Amount |
|----------------|--------|--------|
| _____          |        |        |
| _____          |        |        |
| _____          |        |        |

9. TAX RETURNS: Signed complete 2009 tax returns and the 2009 tax assessments must be submitted with your application as indicated below:

- a) If you are **single** and have a permanent address the same as your parents, please submit completed **signed** copies of 2009 Income Tax returns and the 2009 tax assessment for **both parents** along with **your** own **signed** 2009 Income Tax return and the 2009 tax assessment.
- b) If you are **single**, 25 years of age or over, with a permanent address different from your parents, and receive no financial assistance from your parents, please submit **your** completed **signed** 2009 Income Tax return and the 2009 tax assessment
- c) If you are **married**, please submit completed **signed** copies of 2009 Income Tax returns and the 2009 tax assessment for **both you** and **your** spouse.

**10. ACTIVITIES:**

What community / organizational activities are you involved in?

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List other interests and hobbies

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**11. REMARKS:**

Please make any additional remarks which will help in the evaluation of your application

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**12. REFERENCES:**

**Two letters of reference** must be **attached or forthcoming** from persons **other than relatives** (*e.g. Rabbi, Professor, Employer*)

a) Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Telephone (    ) \_\_\_\_\_

b) Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Telephone (    ) \_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

## CHECKLIST

1. **PLEASE NOTE THAT THE MEYER W. GASNER / JOE BERMAN EDUCATIONAL SCHLARSHIP FUND IS ONLY AVAILABLE FOR PROGRAMS THAT ARE NOT MASA APPROVED, OR IF YOU ARE NOT MASA ELIGIBLE.** MASA is a joint venture of the Government of Israel, the Jewish Agency for Israel (UJA Federation's overseas partner) and Jewish Federations across North America, including Toronto. Individuals must first determine their MASA eligibility. For MASA information, and to apply for your MASA grant, go to their website at [www.masaisrael.org](http://www.masaisrael.org).
2. All applications and attachments must be received by **May 3, 2010**.
3. Your application will not be considered completed without the following:
  - a. 2009 Tax Returns: signed, complete tax returns from all individuals as requested in question #8.
  - b. 2009 tax assessment
  - c. Two (2) letters of reference
4. On one page, describe your career plans in Jewish education, including an explanation of how your program of studies will facilitate your career objectives.

Please note:

*All documents will be kept in strictest confidence.*

*Please return to:*

All the necessary documents **MUST** be attached.

UJA Federation of Greater Toronto  
Sherman Campus | Lipa Green Centre  
4600 Bathurst Street, 5th floor  
Toronto, Ontario M2R 3V2

Attention: Miriam Daniels

For more information:

E-mail: [mdaniels@ujafed.org](mailto:mdaniels@ujafed.org) Phone: 416.635.2883 ext. 5116