

NELL S. FEUCHTWANGER SCHOLARSHIP FUND

of the

New Castle Section of the National Council

of Jewish Women

New Castle, Pennsylvania

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APPLICATION FOR SCHOLARSHIP AID

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Before this application can be considered complete, be certain that the transcript of your school record to date has been sent by your principal to the chairman of the committee.

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Date

1. Name
Give name in full—Do not use initials

2. Date and place of Birth

3. Address Telephone

4. Name of Parent, Parents, or Guardian

5. Occupation of Parents

6. Name of school last attended * *

7. Are you a graduate? If so, when? If not, state when and why you left school

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8. Have you filed a certificate for admission to any College, University or Technical School? If so give name

9. If not accepted on certificate, have you passed entrance examination?

10. What part have you taken in the scholastic, social, athletic, or other activities of your school, church or community, and in what position?

11. Are you already a student in a College, University or Technical School? If so, give name

12. If not already a student in a College or University, what College, University, or Technical School do you wish to enter?

13. Give name and address of three persons, including the Prinsipal or Home Room Teacher, from whom information may be obtained in regard to your character and ability as a student in the field of both secondary and higher education

14. Give name and address of three persons who can give information in regard to your financial condition and that of your family

15. Have you any brothers or sisters attending school or college? If so, state who and where

16. How many persons are financially dependent upon your parents? Who and to what extent?

17. Are you employed at present?

If not, have you been employed in the past?

Give full information in regard to employment, by whom, where, kind of work, compensation, and why employment was discontinued

18. What is the least amount of money you will need for the coming school year?.....

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19. How do you propose to meet the payment of the remainder of necessary fees?

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20. If granted a scholarship, and if at any time after leaving the College, University, or Technical School, your financial conditions permit, are you willing to repay the organization which furnished the amount of this scholarship allowance?

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21. Have you filed any other application for scholarship aid? If so, state where and when

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22. Have you received scholarship aid up to the time of filing this application? If so, state where, and the amount received

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APPROVED by Parent, Parents, or Guardian

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Date

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This application should be properly filled out and addressed to—

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