

JUVENILE AID SCHOLARSHIP ORGANIZATION INFORMATION AND INSTRUCTIONS

Juvenile Aid Scholarship funds are made available to Jewish students who reside in Lynn, Swampscott, Marblehead, Nahant, and Salem and who demonstrate financial need for higher education expenses. The scholarships are awarded primarily for students entering their first year at an accredited institution of higher learning, although when funds are available scholarships may be awarded for subsequent school years. Scholarship awards are "need" based.

Application Requirements:

1. Completed and signed Application form (Application Form (available [here](#)) and can be requested from laura@lfgoodman.com). Online form should be completed, saved with applicant's name included in saved document name. Completed application should be emailed to laura@lfgoodman.com. The completed application and other required documents can be emailed, sent by US mail, or delivered. We recommend opening the application and instruction files in your web browser such as Firefox, Edge, or Chrome.
2. Cover Letter including, but not limited to, a description of the student's financial circumstances demonstrating a need for financial assistance and the student's involvement in the Jewish community and other matters which the student believes will assist our Scholarship Committee in evaluating the student's application.
3. Current resume with academic and past two-year work history and anticipated summer employment.
4. Documents from the college or other institution of higher education that the student will be attending detailing first year anticipated expenses such as tuition, room and board, books, activity fees, and insurance. If the school is located outside of New England, include estimated travel expenses. Provide details of all financial assistance being offered to the student from all sources.
5. FAFSA Profile.

APPLICATIONS WILL NOT BE CONSIDERED UNLESS ALL OF THE REQUIRED INFORMATION AND DOCUMENTATION HAVE BEEN PROVIDED AND SUBMITTED.

DEADLINE FOR SUBMISSION: MAY 6, 2024

Completed application and supporting documentation must be submitted by emailing, mailing or delivery so as to be received on or before May 6, 2024, to:

Ms. Laura Goodman
21 Amherst Road
Marblehead, MA 01945
781-631-3769
laura@lfgoodman.com

**JUVENILE AID SCHOLARSHIP ORGANIZATION
2024 APPLICATION FORM**

Attach additional pages if needed. Please review instructions for submission of this application and other required materials. Incomplete applications will not be considered.

Current School **Graduation Date**

Applicant Last Name **First Name** **M.I.**

Date of Birth:

Applicant Current Contact Information

Street & Number **City/Town**

Landline **Cell Phone** **Email**

Applicant Family Information:

Parent 1 Name **Occupation**

Employer

Street & Number

City/Town, State Zip

Tel/Cell Phone **EMAIL**

Employer

Parent 2 Name **Occupation**

Employer

Street & Number

City/Town, State Zip

Tel/Cell Phone **EMAIL**

Step-Parent 1 Name	Occupation	Employer
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Street & Number

City/Town, State Zip

Tel/Cell Phone **EMAIL**

Step-Parent 2 Name

Occupation

Employer

Street & Number

City/Town, State Zip

Tel/Cell Phone

EMAIL

Siblings:

Name

School/Class/Year

Have any of your siblings attended a private school in the past four years?
If YES, provide students name, private school and years attended.

Describe Applicant's Jewish education, identity, synagogue/shul affiliation, Jewish community involvement:

School activities such as sports, music, art, clubs, student government, etc.

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Work Experience
Date Employer Position Hours/Week Other Information

Future Goals and Objectives:

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Other Scholarship Assistance:

Source	Status: Applied for/Awarded	Anticipated or Awarded Amount
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Other information not included in your cover letter, such as personal or family circumstances that may have affected or influenced your participation and/or performance during High school.

Attach additional pages if needed. Please review instructions for submission of this application and other required materials. Incomplete applications will not be considered.

I certify to the best of my knowledge and belief that the information contained herein and in all supporting documentation is true and accurate.

Signature of Applicant

Signature of Parent/Guardian

**NOTICE: THIS FORM AND ALL REQUIRED SUPPORTING
DOCUMENTATION MUST BE DELIVERED OR EMAILED
BY MAY 6, 2024 TO:**

Laura Goodman
21 Amherst Road
Marblehead, MA 01945

laura@lfgoodman.com

For further information, email Laura Goodman.