



Need – Based Scholarship Application

The PANIM Institute for Jewish Leadership and Values of BBYO offers financial assistance for high school students to attend PANIM programs. Because these funds are limited, we ask that you only apply if these funds are truly needed. This scholarship is intended to assist families who demonstrate a financial need, , and we encourage those who fall in this category to apply.

Scholarship decisions will be based primarily upon financial need, with some consideration also given to past and current participation in the community, and future leadership potential.

Please be assured that all information provided herein will be kept in the strictest confidence by the staff of PANIM.

Mail the following to PANIM at the address below:

1. Both pages of this application, filled out as accurately as you can.
2. A one page statement concerning your involvement in the community and/or how you hope to benefit from your participation on a PANIM program. Please include a statement about how you intend to share this experience with your community upon your return.
3. A copy of the first page of your parents/guardians' most recent 1040 Tax Form. (Forms will be shredded.)

Mikah Goldman
The PANIM Institute of BBYO
2020 K St. NW, Suite 7400
Washington, DC 20006

If you have any questions or concerns regarding this application, please contact Mikah Goldman at 202-857-6622 or mgoldman@bbyo.org

Applications should be received by our office at least six weeks prior to the PANIM session that you wish to attend to allow us time to reach a decision and respond to you.

Note: Your application for the PANIM program should be sent to your sponsoring agency along with a note indicating that you have applied for financial aid through our office. We will notify them of the amount awarded.

BASIC INFORMATION:

Name: _____ Date of Birth: ____ / ____ / ____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Dates of your PANIM seminar: _____

Synagogue/Group/School: _____ Agency Contact's Name: _____

Agency Contact's Email: _____ Agency Contact's Phone: _____

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FINANCIAL INFORMATION:

Father's Name: _____ Mother's Name: _____

Father's Occupation: _____ Approx. Annual Income: \$ _____

Mother's Occupation: _____ Approx. Annual Income: \$ _____

Does applicant work? Yes () No () If so, Approx. Annual Income: \$ _____

Number of dependent children in household: _____ Number of children attending college: _____

Please explain any additional factors which you feel PANIM should be aware of in order to help us make a decision regarding your request (i.e. any temporary financial difficulties, family expenses, major illnesses, etc.). Please feel free to add an additional page:

What is the total fee (tuition and travel*) for the PANIM program you plan to attend? \$ _____

Are there any funds being provided to you by other sources?

If so, please identify the source(s) and amounts:

Source 1: _____ \$ _____

Source 2: _____ \$ _____

How much is your family able to contribute towards the program? \$ _____

Total amount being provided before PANIM scholarship: \$ _____

Difference = Scholarship Request \$ _____

***PANIM does take travel cost into account when evaluating scholarship applications**

Applicant's Signature

Parent's Signature

Don't forget to attach your one page statement and copy of your parents' tax form, as described on the first page.

For PANIM use only:

Date received: _____ / _____ / _____

Amount Requested: _____ Amount Granted: _____

Applicant Notified: _____ / _____ / _____ by () Mail () Phone _____ Other