Levenson/Krumins Youth Program Scholarship Fund Application

Name of Student/Grade in School: _____

Name of Parent(s): _____

Address: _____

Phone Number: _____ E-mail: _____

List your participation in education and youth programs at Temple Chayai Shalom, (i.e., Confirmation, teacher's aide/madrich(a), TeCSY, building/grounds, Torah reader, etc.):

Program for which you are applying (include website for further information, if available):

Cost of Program:

Address for Program (Funds will be sent directly to the program.):

On a separate page, please describe why you wish to attend this program and how you expect to benefit from it.

Please return the application and essay to:

Youth Scholarship Committee
c/o Laurel Silverman
laurelsilverman@gmail.com