



Student Name _____

Think Israel. Think Ramah.

All information will be kept strictly confidential.

Tichon Ramah Yerushalayim (TRY)/USY High Scholarship Application

Applications must be completed by November 15 for spring TRY Classic and May 15 for the fall TRYmester and submitted to:

Jeff Goodman, Scholarship Chair
Ramah Israel
3080 Broadway
New York, NY 10027

Confidential email: <mailto:ramahisrael@campramah.org>

Fax: (212) 504-0858

Include with this application:

- A copy of your most recent Federal Tax Return and W-2 and/or K1 forms
- A short letter explaining any special circumstances

Other Sources of Financial Aid

Source	Amount	Expected reply date	Expected arrival at Ramah Israel
Synagogue: Men's Club, Women's League/Sisterhood, rabbi/cantor's discretionary fund, etc.			
Federation Funds			
Other (please specify)			

Total: _____

How much are you requesting from the TRY scholarship fund?

(you must specify an amount)

How much will your family be paying towards TRY?

Total: _____

(should equal program tuition)

Have you received scholarship from Ramah? No ___ Yes ___ Years _____

From which Ramah Camp? _____

Number of adults in household _____ Parent/guardian marital status _____

Number of children _____ Children's ages _____

www.ramah.org.il | info@ramah.co.il

02.679.2069 :פקס | 02.679.0243 :טל | 9131602 ירושלים | ת.ד. 31709 רמת השרון 8 א' | רמה ישראל | רח' קצנלסון 8 א'

Ramah Israel | 8a Katzenelson St. | P.O. Box 31709 Jerusalem, Israel 9131602 | Phone: 011.972.2.679.0243 | Fax: 011.972.2.679.2069

North American Office | National Ramah Commission | 3080 Broadway, New York, NY 10027 | Phone: 212.678.8883 | Fax: 212.749.8251

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