

***2020 -2021 Ahava Dan Omaha Jewish Community Engagement
Fund Scholarship Application – CDC & Friedel***

The 2020-2021 Ahava Dan Omaha Jewish Community Engagement Fund Scholarship is available for the 2020-2021 academic year at the Pennie Z. Davis Child Development Center at the JCC and the Friedel Jewish Academy. The generous donors have allocated funds to be used for ten awards of up to \$5,400 each. Jewish families in the Omaha metro area meeting the following criteria are eligible.

A few eligibility requirements and clarifications:

- The family will have children who have never attended the CDC or Friedel.
- The family is not currently actively involved in Jewish Omaha
- The family will be willing to have financial 'skin in the game' via self-funding the Gateway Program. The current cost is \$648 which includes a JCC membership and membership in the synagogue of the family's choice.
- At least one parent must be Jewish
- Must be living in the Omaha metropolitan area
- The award is up to \$5,400 depending on the cost of either the CDC or Friedel.
- The family must be a resident of the Omaha metropolitan area.
- Only **one** Ahava Dan award per family.

To apply, complete this application in full and return it to Diane Walker c/o the Jewish Federation of Omaha. If you have any questions, please contact Diane Walker at (402)334-6407 or dwalker@jewishomaha.org.

The completed application must be received by **March 2, 2020**.

The objective of the Ahava Dan Omaha Jewish Community Engagement Fund is to immediately impact the engagement of the Omaha Jewish Community by expanding access to meaningful Jewish experiences. We believe this new scholarship fund will serve as an incentive to engage families and their children. **Financial need is not a consideration in these awards.**

If more than ten (10) families qualify for the Ahava Dan Scholarship for the CDC and Friedel, the Jewish Federation of Omaha will conduct a lottery and ten lucky families will be selected.

2020 -2021 Ahava Dan Omaha Jewish Community Engagement Fund Scholarship

Application – CDC & Friedel

Applicant/Legal Guardian Information

NAME					EMAIL						
ADDRESS					CITY			STATE		ZIP	
HOME PHONE				CELL PHONE				WORK PHONE			
AGE		GENDER		DATE OF BIRTH				<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
<input type="checkbox"/> Yes, I am Jewish <input type="checkbox"/> No, I am not Jewish				Membership in a synagogue or other Omaha Jewish organization Yes - <input type="checkbox"/> No - <input type="checkbox"/>				Which ones?			

Spouse Information

NAME					EMAIL						
ADDRESS					CITY			STATE		ZIP	
HOME PHONE				CELL PHONE				WORK PHONE			
AGE		GENDER		DATE OF BIRTH				<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
<input type="checkbox"/> Yes, I am Jewish <input type="checkbox"/> No, I am not Jewish				Membership in a synagogue or other Omaha Jewish organization Yes - <input type="checkbox"/> No - <input type="checkbox"/>				Which ones?			

Children

NAME					DOB				
NAME					DOB				
NAME					DOB				
NAME					DOB				

Friedel Jewish Academy

Child #1 Last Name		Child #1 First Name		Grade in Fall	
Child #2 Last Name		Child #2 First Name		Grade in Fall	
Child #3 Last Name		Child #3 First Name		Grade in Fall	
Cost of tuition (\$_____ for first child plus \$_____ for each additional child)					\$
Total tuition					\$

Pennie Z. Davis Child Development Center

Child #1 Last Name		Child #1 First Name		DOB	
Age Category	<input type="checkbox"/> Infant: 6wks-18mos	<input type="checkbox"/> Toddler: 18mo-3 yrs	<input type="checkbox"/> 3 yrs-5 yrs		
Weekly attendance	<input type="checkbox"/> 2 days per week	<input type="checkbox"/> 3 days per week	<input type="checkbox"/> 5 days per week		
Yearly attendance	<input type="checkbox"/> Full day, 12 mos a year	<input type="checkbox"/> Full day, 9 mos a year	<i>(child graduates CDC in May 2019)</i>		
	<input type="checkbox"/> Part day, 12 mos a year	<input type="checkbox"/> Summer camp* - Please list # of sessions ____			
	<input type="checkbox"/> Part day, 9 mos a year				
Child #2 Last Name		Child #2 First Name		DOB	
Age Category	<input type="checkbox"/> Infant: 6wks-18mos	<input type="checkbox"/> Toddler: 18mo-3 yrs	<input type="checkbox"/> 3 yrs-5 yrs		
Weekly attendance	<input type="checkbox"/> 2 days per week	<input type="checkbox"/> 3 days per week	<input type="checkbox"/> 5 days per week		
Yearly attendance	<input type="checkbox"/> Full day, 12 mos a year	<input type="checkbox"/> Full day, 9 mos a year	<i>(child graduates CDC in May 2019)</i>		
	<input type="checkbox"/> Part day, 12 mos a year	<input type="checkbox"/> Summer camp* - Please list # of sessions ____			
	<input type="checkbox"/> Part day, 9 mos a year				
Child #3 Last Name		Child #3 First Name		DOB	
Age Category	<input type="checkbox"/> Infant: 6wks-18mos	<input type="checkbox"/> Toddler: 18mo-3 yrs	<input type="checkbox"/> 3 yrs-5 yrs		
Weekly attendance	<input type="checkbox"/> 2 days per week	<input type="checkbox"/> 3 days per week	<input type="checkbox"/> 5 days per week		
Yearly attendance	<input type="checkbox"/> Full day, 12 mos a year	<input type="checkbox"/> Full day, 9 mos a year	<i>(child graduates CDC in May 2019)</i>		
	<input type="checkbox"/> Part day, 9 mos a year	<input type="checkbox"/> Summer camp* - Please list # of sessions ____			
	<input type="checkbox"/> Part day, 9 mos a year				
Total monthly Child Development Center tuition				\$	/mo

I attest that the foregoing information is true and correct. I understand that knowingly providing false information will deem me ineligible to receive assistance from the Ahava Dan Jewish Community Engagement Fund, the Jewish Federation of Omaha and its agencies.

APPLICANT SIGNATURE

DATE

SPOUSE SIGNATURE

DATE