Diane Walker, Sokolof Scholarship Coordinator Jewish Federation of Omaha Foundation 333 South 132<sup>nd</sup> Street Omaha, Nebraska 68154 402.334.6551 dwalker@jewishomaha.org

# Instructions to Jewish Students Applying for a Karen Sokolof Javitch Merit Music Scholarship Academic Year 2024-2025

This application is for a merit scholarship for a Jewish student from the Omaha metropolitan area who is currently pursuing a degree in music performance, composition or music education at a college, university or music conservatory. This scholarship is not based on financial need, but is in recognition of musical and personal achievements, overall good character, scholastic performance, and community service. This is not a need-based award, but it is the donor's intent that the funding be used for tuition. An applicant (or his/her family if the student has been attending college outside Omaha) must have resided in the Omaha metropolitan area for at least the past two years.

Your application form must be received by the Sokolof Scholarship Coordinator by April 1, 2024. You are responsible for seeing that all documentation and references are received by that date.

- 1. You are only eligible to be awarded a Sokolof Merit Scholarship three times.
- 2. Complete the application form. Please print legibly in black ink in all areas that do not require typed responses. Attach additional sheets, **with your name at the top**, where necessary.
- 3. **Sign the application** (page 3) and submit it to the Sokolof Scholarship Coordinator at the address above prior to **April 1, 2024**.
- 4. Arrange for your college/university transcripts from all institutions since high school to be sent to the Sokolof Scholarship Coordinator at the address above prior to **April 1, 2024**.
- 5. Give a recommendation form to each person you have selected. Remember to complete the top of the confidential form with your signature for your voluntary waiver to access the recommendation. If you are downloading your application form from the internet, you will need to print three recommendation forms.

Please give a recommendation form to three people (not family members). At least one must be from a faculty member at your college/university who is familiar with your dedication to the musical field. Other recommendations may be from someone you worked with in a volunteer or employment setting, clergy, or anyone who can attest to your personal character and/or academic/musical abilities. These forms are confidential. Please sign the waiver on each form.

The people submitting recommendations must return their forms by **April 1, 2024** to the Sokolof Scholarship Coordinator, Jewish Federation of Omaha Foundation, 333 S. 132<sup>nd</sup> Street, Omaha, NE 68154. In order to facilitate the timely return of your recommendations, it is advisable to attach to each recommendation form a legal-size, stamped envelope, addressed to the Sokolof Scholarship Coordinator.

You may call Diane Walker, Sokolof Scholarship Coordinator, at 402.334.6551 or email her at <a href="mailto:dwalker@jewishomaha.org">dwalker@jewishomaha.org</a> with any questions.

While the deadline is April 1, 2024, earlier submissions are encouraged. The recipients of the Sokolof Scholarships will be notified by May 1, 2024.

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#### This application is due by April 1, 2024 to the above address. Late application or application with late supporting documentation will not be accepted.

Scholarships will be awarded by the Sokolof Scholarship Committee of the Jewish Federation of Omaha Foundation.

#### **General Information**

How long have you lived in the Omaha Metropolitan Area?					
Anticipated Graduation	n Date				
Date of application		Age	Date of birth		
Name					
Name	Last	First	Middle		
Mailing Address					
	Street	City	State	Zip	
Email					
Phone number		Cell			
Mother's name					
Address					
	If di	fferent from student			
Father's name					
Address					
	If di	fforant from student			

## **Transcripts**

You must request that an official copy of your college/university transcript be sent to the Sokolof Scholarship Coordinator, Jewish Federation of Omaha Foundation, 333 S. 132<sup>nd</sup> Street, Omaha, NE 68154 by **April 1, 2024**. The transcript must reflect your cumulative GPA from your freshman year through your most recently-completed semester. If you have attended more than one institution since high school, request a transcript from each college or university.

School currently attending
Transcript requested from
Other schools attended including high school
Have you ever been expelled, suspended, dismissed or had any disciplinary action taken against you Yes No If yes, please explain.
Have you ever been convicted of a misdemeanor, felony or other crime?  Yes No If yes, please explain.
Musical Field
What field of music are you pursuing?
What degree are you working toward?

## **College Activities**

On an attached sheet, with your name at the top, please type your responses to the following:

- 1. Describe your musical activities within your college and/or community.
- 2. Describe your extracurricular activities and community service, including volunteer experiences. For volunteer experiences, please include years of involvement as well as hours spent.
- 3. List any prizes, honors, awards and/or scholarships received.
- 4. If you have been employed during college, including summer jobs, list the type of work and length of employment.

#### **Essays**

On an attached sheet, **with your name at the top**, please type your answers to the following questions using no more than 150 words for each answer.

- 1. When did you first discover your love of music?
- 2. Describe your formal musical training.
- 3. How do you feel your education will help you achieve your career goals? And where do you see yourself in five years?
- 4. Why do you feel you should be considered for this Sokolof scholarship?

To the best of my knowledge, all information	n on this application is accurate and truthful.
Signature	Date

## Confidential Recommendation Form Karen Sokolof Javitch Merit Music Scholarship Academic Year 2024-2025

**To the student:** I voluntarily waive access to this recommendation.

Student's Name (Print)	
Student's Signature	Date
Jewish Federation of Omaha Foundation, for composition, or music education. This scho Omaha metropolitan area and is based on machievement, overall good character, scholar your honesty; please inform us if you know	dation:  f Javitch Merit Music Scholarship, administered by the or the further pursuit of a degree in music performance, plarship will be presented to a Jewish student from the nerit, not financial need. Criteria are musical and personal astic performance and community service. We appreciate of any reason why this student should not receive this merit in confidence. Thank you for your time and effort on this
	sidered for this scholarship, this form must dress below no later than April 1, 2024.
this student would be a deserving candidate Describe topics you are familiar with that w	t's name and your name at the top telling us why you feel for the Karen Sokolof Javitch Merit Music Scholarship. vill be helpful to the selection committee, such as musical rformance, motivation, creativity and dependability.
How long have you known this student and	in what context?
Please print your name	
Signature	Date
Email	Phone number

You may call Diane Walker, Sokolof Scholarship Coordinator, at 402.334.6551 or email her at <a href="mailto:dwalker@jewishomaha.org">dwalker@jewishomaha.org</a> with any questions.

Please return this form no later than April 1, 2024 to:

Diane Walker, Sokolof Scholarship Coordinator Jewish Federation of Omaha Foundation 333 S. 132<sup>nd</sup> Street Omaha, NE 68154