



APPLICATION
BILL HERTZ MEMORIAL SCHOLARSHIP AWARD

Please Print Legibly

Name of Applicant _____

Address _____

City, State, Zip _____

Date of Birth _____ Social Security Number _____

Applicant's Telephone Number: _____

Applicant's Email Address: _____

High School Name: _____

Parents'/Guardian's First/Last Names: _____

Parent Best Daytime Telephone Number: _____

Parent Email Address Checked Most Frequently: _____

Mother's Occupation _____ Father's Occupation _____

List ages of other children in the family (excluding applicant): _____

Rank in Class _____ out of _____ Grade Point Average _____ Graduation Date _____

Test Scores (with dates) ACT _____ SAT _____ Other _____

Athletic Activity Record (Please attach additional sheet if necessary):

Signature of Athletic Director or Coach _____

Other Scholarship or Financial Aid for which you have applied: _____

Name of college you wish to attend: _____

Major area of study: _____

Have you been accepted? _____ Where? _____

Estimated cost of college for freshman year at (School Name): _____

Tuition \$ _____ Housing \$ _____ Total \$ _____

Estimated amount of total annual support from family and savings: \$ _____

Estimated financial aid from other sources: \$ _____

A copy of your parent's 2010 and 2011 income tax returns must be submitted by July 6, 2012 to be considered for this scholarship. *(Please note: Only the Executive Director and independent counsel will have access to personal financial documents.)*

Accomplishments/Honors

Recommendation by School

Signature of Principal

Date

Please write or attach a brief biographical sketch (100 words) including vocational, educational and personal plans in the space below.

I understand that if I participate in collegiate athletics, any scholarship I may receive is subject to the rules and regulations of the National Collegiate Athletic Association (NCAA).

Signature of Applicant

Date

Are any Michigan Jewish Sports Foundation Board or committee members related to the applicant? Yes No If yes, please list their name(s) and relationship:

Have you been convicted of a crime? (This does not include traffic or parking tickets.)

Yes No

If yes, please explain.

Please attach the following and send to: David J. Blatt
Executive Director
Michigan Jewish Sports Foundation
6632 Telegraph Road #304
Bloomfield Hills, MI 48301

Checklist:

- Application
- 2010 AND 2011 Income Tax Returns
- High School Transcripts
- Senior Picture/Wallet-Size Photo or email high resolution JPEG
- A minimum of one Letter of Reference, including contact information
- Copies of any articles about the applicant.

DEADLINE: JULY 6, 2012

APPLICANTS WILL BE NOTIFIED BY AUGUST 6.

FOR FURTHER QUESTIONS PLEASE CONTACT:

DAVID BLATT - EXECUTIVE DIRECTOR

(248) 592.9323 OR EMAIL AT DBLATT@MICHIGANJEWISHSPORTS.ORG

Corporate Office

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www.michiganjewishsports.org

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The Michigan Jewish Sports Foundation is a 501(c)3 philanthropic organization committed to the support of cancer charities and bettering the lives of children.