

RABBI MORRIS SCHOLARSHIP APPLICATION FUND  
CONTINUING EDUCATION APPLICANT (NOT PRESENTLY IN SCHOOL)

Last Name \_\_\_\_\_, First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

Present Job \_\_\_\_\_

Employer \_\_\_\_\_

**On separate sheet(s) or paper please answer the following, Type or write/print legibly in black ink. Put your name on top right corner of each sheet. Applications should be typed or word processed on a computer.**

1. Briefly describe you educational background and your work experience since leaving school.
2. Why have you decided to return to school?
3. In several sentences tell us why you are applying for this scholarship.
4. How have Jewish values shaped who you are and how will they help you achieve your new career goals?

**RETURN TO DIANE EHRLICH C/O SISTERHOOD CONGREGATION BETH-ISRAEL JUDEA NO LATER THAN February 4, 2008.**