BIRMINGHAM JEWISH FOUNDATION AUBURN Scholarship Policy

To be eligible for a scholarship to Auburn University, the student must meet the following conditions:

- 1. Student must attend Auburn University
- 2. Student must be Jewish
- 3. Student must join Hillel at Auburn
- 4. Student must demonstrate financial need. This is a need-based scholarship.

If you meet these requirements:

- 1- Complete the Birmingham Jewish Foundation Auburn Scholarship Application
- 2 -Submit a copy of your letter to Auburn that states your intention to attend Auburn University.
- 3 -Submit the Summary page from FAFSA that includes the expected family contribution determined by FAFSA and the FAFSA score.
- 4- If you are a returning student, submit your transcript.
- 5-Submit an essay, 250-300 words:

For freshman, the essay should address why they have chosen to attend Auburn and why participation in Jewish life at the University is important to them.

For upperclassman, the essay should discuss their involvement in Jewish life on campus and how this has impacted their college experience.

Submit all of the above to Lynn Rathmell: Lynn@cjfsbham.org.



BIRMINGHAM JEWISH FOUNDATION AUBURN SCHOLARSHIP APPLICATION

Date _____

Name	Birth Date		Gender	
Address(Street)				
(Street)	(City)	(State)	(Zip Code)	
Phone Number	Marital Sta	tus		
High School Attended	Da	ite of Gradua	tion	
Present or Previous College	Attended			
Date Attended	Anticipated 6	Graduation Da	ite	
School or College You will A	ttend			
Include Letter of I	ntention to atte	nd Auburn	University	
This coming year, you will be			_ Sophomore J aduate Student	
List extracurricular activities	and achievement	s in or out of	school:	
Awards, honors, prizes, not l	isted above:			

Famil Guard		nformation n 1	Guardian 2		
		Age		Δαρ	
Telep	hoi	ne	Telephone		
<u>Siblin</u>	<u>ıgs</u>				
Name)	Age	School or Employer	Address	
Α.		Student Annual	Income and Financial Aid This College Year	<u>l</u>	
	1.	Annual salaries and wages			
	2.	From family			
	3.	Social Security/Pensions			
	4.	Interest & Dividends (Taxable And Non-Taxable)			
	5.	Government Scholarship Grants			
	6.	Other Scholarship Grants, aside From HFLA (Show Grants and Amounts on separate page)	<u></u>		
	7.	Loans, aside from HFLA			
	8.	Income from trusts			

	All other income (Itemize On separate sheet)	
	10. TOTAL	
	OTE: If married, show combined amount exact figures are not known, give your es	s and other information of applicant and spouse. stimate and indicate with an "E."
	<u>E</u> :	XPENSES
В.	Annual Education Expenses:	This College Year
	 Tuition Fees Books Supplies Other (Explain) TOTAL 	
C.	Other Expenses:	This College Year
	1. Dormitory fees	
	2. Rent (including utilities)	
	3. Food and household supplies	
	4. Clothing, Laundry, Cleaning	
	5. Auto expenses (see G-1)	
	6. Other transportation	
	7. Medical	
	8. Other (Itemize)	
D.	Total All Expenses	
E.	Do you own any of the following? If so,	, put the value in the right-hand column.
	1. Cash, Savings Accounts, CD's, et	tc
	2. U.S. Securities	

	3.	Stocks and bonds
	4.	Value of home, if owned
	5.	Other real estate
	6.	A trust set up for your benefit (Explain)
	7.	Any other assets (Itemize on separate sheet)
	8.	TOTAL
F. D	o yo	ou have any debts? If so, show the amount in the right-hand column.
	1.	Monthly accounts and credit cards
	2.	Mortgages and other installments (Monthly payments \$)
	3.	Unpaid income tax
	4.	Other debts (Itemize)
	5.	TOTAL
G. C	Othe	r Information:
	1.	Do you own an automobile? Yes No
		Do you have use, as a principal driver, of an automobile owned by another? Yes No
	2.	Were you required to file an income tax return last year? Yes No
	3.	Do one or both parents claim you as a dependent on a U.S. Income Tax Return? Yes No
	4.	Do you have dependents? Yes No (If yes, explain below)
	_	
	en	Are you entitled to any form of aid (as free or reduced tuition or case grant from you apployer or employer of one of your parents)? Yes No
	IT V	ves, use separate sheet to give details: if no, give reason for not doing it.

PLEASE USE A THE LAST PAGE OF THE APPLICATION TO ITEMIZE EARLIER QUESTIONS OR TO ADD ANY OTHER INFORMATION THAT MAY BE USEFUL AND ANY EXTENUATING CIRCUMSTANCES FOR FINANCIAL NEED.

PLEASE ATTACH FASFA SUMMARY PAGE WITH APPLICATION

GUARDIAN INFORMATION FORM

3uardian 1		_			
Guardian 1(Name)			(Phone Number)		
(Address)	(City	·)	(State)	(Zip Code)	
Occupation		_	Income		
In Ho	ome: Yes	No_			
Guardian 2(Name)			/Dhana N		
(Name)			(Phone N	umber)	
(Address)	(City	')	(State)	(Zip Code)	
Occupation		_	Income		
In Ho	ome: Yes	No_			
Dependents (List all):					
(Name)	(Age)		(Occupation or	School)	
s					
l					
	_				
	_				
5.					

calendar	me and expense information for calendar year (or latest tax year, if other than year) for which tax return was filed or preparation substantially completed. Year
1.	Income from U.S. Tax Return 2016: (Show combined figures if parents filed separately)
	a. Total income (page 1 <u>before</u> deductions at bottom) \$
	b. Total number of exemptions
2.	Income and benefits not on tax return:
	a. Tax free interest b. Social Security c. Recurring benefits d. Child support
	e. All other income and benefits (itemize on next page) f. TOTAL
3.	Deductions from U.S. tax returns: (Show combined figures if parents filed separately)
	a. Deduction on page 1 to arrive at BB-1 b. Total of itemized deductions as shown on page 2 on income tax return
BB. A	ssets and liabilities at date of application. (All at estimated current values)
	1. Assets:
	a. Cash, savings accounts, CD's, etc. b. U.S. Securities c. Stocks and bonds d. Home (if owned) e. Other real estate f. All other assets (itemize below) g. TOTAL ASSETS
	2. Liabilities
	a. Monthly accounts and credit cards b. Mortgages and other installments
;	3. Total assets minus total liabilities Itemized information
