

Bureau of Jewish Education
High School of Jewish Studies
Tuition Assistance Form

Scholarships are for the truly needy. Please apply only if full tuition is burdensome to your family. Tuition covers only a portion of our high school costs and we depend on your tuition to sustain the high school program.

Last Name _____	First Name _____	Grade _____
Address _____	City/State/Zip _____	
Home Phone _____	Temple Affiliation _____	
Parent Name _____	Work Phone _____	
Parent Name _____	Work Phone _____	
How much can you afford to pay? \$ _____	Scholarship Amount Requested: \$ _____	

Please explain fully why you need this scholarship: _____

You may be asked to provide supporting documentation to substantiate your request for financial assistance.

You will be contacted mid-October with your scholarship amount

I understand that any granting of scholarship assistance is contingent upon my payment of the remaining tuition by December 31, or by an agreed upon extension. Failure to meet my obligation will result in revocation of tuition assistance.

Signature: _____	Date _____
------------------	------------

RETURN COMPLETED FORM TO: Evie Weinstein
High School of Jewish Studies
805 Delaware Avenue
Buffalo, New York 14209