

Congregation Beth Emeth

Megan Miriam Berman Youth Scholarship Fund

Type of subsidy being applied for (select only one option):

Date submitting this application: _____

____ Standard Subsidy

____ Financial Need Subsidy

____ President's Subsidy

Applicant Information

Name _____ Parent(s) Name(s) _____

Address _____

Home Phone _____ Parent Cell _____

Applicant email _____ Parent email _____

Event Information

Event _____ Date(s) of event _____

Total cost of event (including separate transportation if applicable) _____

Front and back of this form must be completed before application can be considered.

For office use:

Parent in good standing _____

Met eligibility for event _____

Been Involved choices met _____

Pay it Forward choices agreed upon _____

Previous **Pay it Forward** commitments
were met _____

Approved amount _____

Reason declined _____

Youth applying for a Megan Miriam Berman Youth Scholarship Fund subsidy are expected to have completed 2 or more **Been Involved** Options as listed below. Please check which of the options you have completed.

Been Involved Options

- ☐ Attended services in the past month
- ☐ Attend CBE Religious School or Chai School
- ☐ Completed CBE Religious School and Chai School
- ☐ Attend a Jewish Day School
- ☐ Currently serve as a madrich or madricha at CBE
- ☐ Attended Kadima or USY programming in the past programming year
- ☐ Hold a chapter leadership position or a regional leadership position for Kadima or USY
- ☐ Attended an education program of Judaic content sponsored by CBE, the JCC, or another synagogue or educational institution
- ☐ Led or assisted with Youth services or other Jewish programming for younger children

Youth applying for a Megan Miriam Berman Youth Scholarship Fund subsidy are expected to commit to completing 2 or more **Pay it Forward** Options within the coming year. Please check which of the options you will complete.

Pay it Forward Options

- ☐ Attend services in the coming month
- ☐ Tell about your experience at the funded program at a service or youth program (see the CBE Youth Director for ideas and suggestions)
- ☐ Write about your experience at the funded program for the Shofar (CBE newsletter) or for posting to the CBE website
- ☐ Lead or assist with Youth services or other Jewish programming for younger children
- ☐ Attend Kadima or USY chapter programs
- ☐ Attend Kadima or USY regional programs
- ☐ Make phone calls or use social media to encourage others to attend Kadima or USY events
- ☐ Run for a chapter or regional leadership position
- ☐ Discuss your other **"Pay it Forward"** ideas with the CBE Youth Director for approval

Please attach a copy of your event application or online confirmation of registration.

By signing below, I agree that all information on this form is true.

Youth signature _____ Date _____

Parent signature _____ Date _____