

KRAMER – LEVINSON MEEMORIAL SCHOLARSHIP FUND * SCHOLARSHIP APPLICATION

NAME	Date of Birth			
Address	Town			
Place of birth	Citizenship			
MILITARY SERVICE: <input type="checkbox"/> in Israel <input type="checkbox"/> Elsewhere (Specify) _____ Branch of Service _____ Highest Rank _____ Served From _____ to _____				
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other (Specify) _____ Do you have any children? <input type="checkbox"/> Yes <input type="checkbox"/> No If you have children, indicate sex and ages:				
FOREIGN LANGUAGES:	<u>Read</u>	<u>Speak</u>	<u>Translate</u>	<u>Understand</u>
	(INDICATE DEGREE OF FLUENCY)			
PRIOR EDUCATION: High School _____ College/University (Indicate name of college, major subject, number of years completed, and Degree.)				

ECONOMIC STATUS:

What occupations are your parents engaged in?

What is your present occupation, employer, and monthly net salary?

Approximately how did you earn (Net) during the past 12 months?

If you are married, please furnish the same information concerning your husband or wife.

EDUCATIONAL FINANCES:

How have you financed your education up to now? (Parents; self-employment, other scholarships; etc.)

Why do you need financial assistance to continue your education?

PROFESSIONAL GOALS:

What area of social service or social work are you interested in as your career? Give a brief explanation of why you wish to specialise in this particular area.

PERSONAL:

Give a brief biographical sketch of yourself. (Use additional paper if necessary.)

Date

Signature

RECOMMENDATION OF TEL AVIV UNIVERSITY SCHOLARSHIP COMMITTEE: