

Personal Information

Legal Name

Mr./Mrs./Ms. Last _____ Middle _____ First _____

If any other name is used professionally, please specify _____

Date of Birth (Year/Month/Day) _____ / _____ / _____

Nationality _____ Passport Number _____

Full Address _____

City _____ State _____ Country _____ Postal Code _____

Telephone _____ Fax _____

E-mail address (optional) _____

Have you applied to the Foundation before: Yes / No | If Yes, please specify the following:

Month _____ Year _____ Reason _____

How did you learn about the M.T. Abraham Foundation?

Educational Experience

Name of Institution _____

City _____ State _____ Country _____

Period of Study | From _____ To _____

Degrees _____ Diplomas _____

Please indicate whether you are affiliated with an institution

Name of Institution _____ Department _____

Your Title _____ Full Address _____

Professional Experience

List any pending applications for grants or scholarships. Kindly specify to whom, on what date, the status of your application and action taken if any.

Project Description

Please describe comprehensively your field of research:

Please explain your choice to contact the M.T. Abraham Foundation rather than another institute:

Please read carefully, sign one copy of the Scholarship Application Form A and send it together with the relevant documentation that might support your request

Name _____ Position _____

Date _____ Signature _____

Administrator's signature—by signing, the administrator is approving the requested item(s) as appropriate.

Date received _____ Date voted on _____ Approved/Denied (circle)

Reason _____

The M.T. Abraham Foundation Grant Request Guidelines

The Foundation's mission is to enhance and support students' academic experience in the Arts and Judaic Studies:

- 1) Priority is given to grant requests that benefit the most students and that fulfill all the requirements.
- 2) Grant requests are limited to 2,500 Euros per grant.
- 3) An administrator must approve Grant requests before submitting to the Board of Directors; his/her approval indicates that the request fits in with current curriculum guidelines and the M.T. Abraham Foundation mission.
- 4) Applications are due by June 15th
- 5) Applicants should inform the Grant Manager by e-mail that their grant has been submitted. E-mail should be sent to: schol@mtabraham.org
- 6) Applicants will be notified of approval/denial within two weeks of member voting.
- 7) The M.T. Abraham Foundation reserves the right to approve or deny all or a portion of the request. The requestor may resubmit at a later date. The foundation may conditionally approve a request with the stipulation that certain questions are answered prior to final approval.
- 8) Grant request monies need to be spent within the current school year and be in order by date per the M.T. Abraham Foundation's bookkeeper.

Requirements

- The grant proposal is complete and signed by an administrator.
- The Grant Manager has been contacted.
- Other possible sources of funding were first considered.
- Lowest costs were researched, with documentation attached.
- Clear benefit to students or community expressed.