

Your name in case pages get separated: _____

MOSAIC Outdoor Clubs of America
2025 Scholarship Applicant Information

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

City *State/Prov* *ZIP/Postal Code*

Home Phone: _____ Alternate Phone: _____

Local Club: _____

If None, why? _____

Have you been to a MOSAIC event in the past? YES/NO

Which events: _____

Briefly explain why you need a scholarship.

Estimate your total costs to attend the event (including transportation, activity costs, etc.). \$ _____

Note: Scholarships are based on the cost of attending the basic event only and do not include money for transportation, activity fees, etc.

Would you attend if you were granted a partial scholarship? _____



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Background

Are you willing to volunteer at the event or on a committee during the year? YES/NO

In what capacity/area (examples would be registration, activity leader, religious committee, sharing any special talents such as knowledge of the outdoors, astronomy, etc.)? _____

Why do you want to attend the event? _____

What can the MOSAIC organization gain from your attendance? _____

A recommendation from your local club or another Jewish Organization would be helpful but is not required. Please either attach a written recommendation or provide us with contact information for a recommendation if you wish to provide one.

Name: _____

Title/Role: _____

Organization: _____

Phone Number: _____

e-mail address: _____

The deadline to apply for a Scholarship is Monday, July 10, 2025