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###### Application for Hope Fund Undergraduate Scholarship Program

**Personal Information**

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**YOUR NAME**

*Last First Middle*

Sex:  Male  Female Date of Birth: **/   /** Place of Birth:

# Month/Day/Year City Country

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| --- | --- | --- | --- |
| Country of permanent legal residence: |  | Country of citizenship: |  |

List all countries where citizenship is held:

What type of ID do you hold?

West Bank ID Number:

Gaza ID Number:

Jerusalem ID Number:

Other ID Number:

Do you hold an American passport or green card?  No  Yes

Do you hold an Israeli passport?  No  Yes

Are you a registered Palestinian refugee?  No Yes: Name of refugee camp:

Do you live in a Palestinian refugee camp?  No  Yes: Name of refugee camp:

**CONTACT INFORMATION**

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| --- | --- | --- | --- |
| Home Address: |  | City |  |

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| --- | --- | --- | --- |
| Home Telephone: |  | Mobile Number |  |

E-mail address:

Have you applied or are you considering applying to U.S. universities on your own? Yes  No

If you answered “yes”, list all the schools that you have applied to or are considering applying to:

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| **Name of School** | **Date Applied/Will Apply** | **School Contact Person** |
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What is your desired field of study? 1.

2.

**Family Background**

Your parents marital status:  Married  Divorced  Separated  Widowed

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| Father`s Occupation: |  | Employer |  |

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| Degree Holding: |  | Mobile: |  |

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| Mother`s Occupation: |  | Employer |  |

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| Degree Holding: |  | Mobile: |  |

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| Number of brothers: |  | Number of Sisters: |  |

How many siblings do you have?

How many people, including yourself and your parents, depend on the income of your parents for daily living expenses? people.

**Family member listing:** Provide information for all family members who depend on the income of your parents for daily living expenses. **Do not include yourself**.

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| **Name** | **Relationship to you** | **Age** | **School/University/Work** |
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Are there any other members of your immediate family either presently enrolled in university education *or* will be enrolled in university education at the same time as you?  Yes, number of family members  No

Are any of your relatives living in the United States or holding a green card or U.S. citizenship? Check boxes below.

Father Mother Brother Sister Aunt (mother’s or father’s sister) Uncle (mother’s or father’s brother)

Cousin. Please provide details:

**Financial Background**

***Income:***

**During the last year, how much household income did your family receive from the following sources?**

**(Please indicate yearly amount for each category in U.S. dollars)**

Mother’s (or Guardian’s) annual income $

Father’s (or Guardian’s) annual income $

Your work $

Income from Other members of the household $

Family business $

Family real estate holdings $

Pension $

Government or other charitable assistance $

Any other sources of family income $

Other (explain) $

**TOTAL YEARLY INCOME $**

***Parents current asset details:***

Mother`s current amount in cash, savings, checking, and deposit accounts $

Father`s current amount in cash, savings, checking, and deposit accounts $

***Please attach supporting financial documents (proof of income), For example, salary slips, bank statement, letter from work, etc.***

***Expenses:***

**During the last year, enter the amounts paid for the items below?**

**(Please indicate yearly amount for each category in U.S. dollars)**

Yearly household expense (rent, food, clothes, transport, etc) $

Medical Expenses (non-refundable) $

Taxes $

Loans or Installments $

Education tuition for dependents $

Other expenses (Specify) $

**TOTAL YEARLY EXPENSES $**

Does your family own/rent family home?  Rent  Own

Enter the amount your parents will be able to pay **per year** for your college expenses. $

**Secondary School Information**

School name (in English):

School address:

Type of school:  Private  Public  UNRWA

Student’s Current grade level:  10th   11th

Name of certificate/diploma:  Tawjihi  IB  SAT  Other, specify

Do you receive any financial aid from your current school towards your high school education? Yes No

If you answered “yes”, provide the following information:

Total annual school tuition fees in US$:

Amount received in scholarships, grants, or aids in US$:

**Extracurricular, Volunteer Activities & Honors**

1. Have you ever participated in any of the following AMIDEAST administered programs?

YES Access CCC  Other

1. List all extracurricular activities and all hobbies in which you have participated. Please state if you have received any awards or have any outstanding achievements in these activities.

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| --- | --- | --- |
| **Name and Description of Activity** | **Month/Year Started** | **Month/Year Ended** |
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| **Name of Award** | **Reason for Receiving Award** | **Date of Award** |
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**Standardized Test Scores**

Please complete the following if applicable:

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| --- | --- | --- |
| **Test Name** | **Date taken or to be taken** | **Score** |
| **MANDATORY:**  AMIDEAST English Language Test |  |  |
| ITP |  |  |
| TOEFL |  |  |
| TOEFL JR/ELTiS |  |  |
| SAT I |  |  |
| SAT II (Subject) |  |  |
| IELTS |  |  |
| OTHER, |  |  |

**Physical Challenges/Disabilities**

Do you have any physical disabilities?  Yes  No

Please describe any physical disabilities that you have:

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If you answered “yes,” what type of accommodation or equipment does your physical disability require and which you currently use? Examples include a wheelchair, hearing aids, etc.

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**SHORT ESSAYS**

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| 1. **Describe your family’s current economic situation.** |
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| **2. Discuss why you feel that you should be awarded this scholarship.** |
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| **3. Describe your academic objectives and goals in terms of your field of study and the reasons why you wish to pursue them.** |
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| **4. Describe the career you plan to pursue after completion of study in the United States.** |
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**Supporting Document Checklist**

Please complete **all** sections of the application form for which you have relevant information.All applicants must submit a completed application and the following supporting documents by hand to AMIDEAST by the deadline.

Tick the items in the checklist below to indicate the information/documents provided:

**9th grade Grades/Report Card**

**10th grade Grades/Report Card**

**11th grade mid-year Grades/Report Card (If Available)**

**AMIDEAST English language placement test score report**

*\*Please contact the AMIDEAST office in your area to inquire about available dates to sit for the AMIDEAST English placement test. (cost of the test: 20 NIS) and attach the score sheet to the application.*

**Supporting financial documents/proof of income (Salary slips/Bank Statements/letter from employer)**

**Copy of the data/photo pages of your passport (If Available)**

**Copy of your birth certificate or ID**

**Completed, signed application form**

**If you/your family are registered refugees, include a copy of your UNRWA Card**

***Applications not fully completed or missing supporting documents will not be accepted or considered for review.***

**Student Consent**—*To be completed by the applicant*

**I am responsible for all parts of my application.**

**I am responsible for understanding each step of the application process.**

**I am responsible for meeting all deadlines for the application process.**

**I am responsible for responding to all emails and information requested in a timely manner.**

**I understand all writing submitted in the application must be mine and mine alone.**

**I pledge to behave respectfully and honestly in all steps of this process.**

**I pledge to cooperate with all requests from the Hope Fund and inform them of any changes immediately.**

**I understand that I will be immediately disqualified for missing ANY deadline.**

**I understand that just applying for the scholarship search program does not guarantee that I will be awarded a scholarship.**

**I agree that I am required to abide by all program policies pertaining to the attendance, behavior, punctuality and assignments and may be disqualified from the program if I do not adhere to all of these policies.**

**I hereby confirm that all information contained in this application is true and accurate. I also understand that I may be removed from the program if it comes to the attention of either AMIDEAST or the Hope Fund that any information provided in this application is not true or accurate.**

**Student’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:**

**Important Information about Eligible Fields of Study in the United States**

**Medicine:** Unlike the Palestinian higher education system, **the U.S. higher education system does not include a bachelor’s degree in Medicine**. Students must first obtain a 4-year bachelor’s degree in a science field through Hope Fund, and then if they wish to apply to medical school, they do so independently, when they are done with their B.A.

**Engineering:** International students who are interested in Engineering typically have a very hard time finding enough financial aid and scholarship funding to cover the high cost of tuition and other fees.  **Therefore, if you are planning to pursue a bachelor’s degree in Engineering in the United States, be aware that most scholarships available for international students are not for engineering programs.** The Hope Fund program will help you be more competitive for admission to an engineering school in the United States, but it may not help you to win a full scholarship

**Parental Consent—*To be completed by a parent***

**My son/daughter has my permission to apply for the Hope Fund Scholarship administered by AMIDEAST. I agree that my son/daughter is required to abide by all AMIDEAST and Hope Fund policies pertaining to attendance, behavior, punctuality and assignments. My child may be disqualified from the program if he/she does not adhere to these policies.**

**I hereby confirm that all information contained in this application is true and accurate and that I understand that my son/daughter may be removed from the program if it comes to the attention of either the Hope Fund or AMIDEAST that any information provided in this application is not true or accurate.**

**That being said:**

1. **I hereby confirm that all information contained in this application is true and accurate and that I understand that my son/daughter may be removed from the program if it comes to the attention of AMIDEAST or Hope Fund that any information provided in this application is not true or accurate.**
2. **I have no objection to my child traveling alone. I understand that if my son/daughter receives a scholarship to study in the United States, he/she will attend school alone and without any family escort.**
3. **I understand that if I withdraw my son/daughter from the application process for any reason that I could control, I shall be required to provide financial compensation to the Hope Fund and AMIDEAST for any effort and any reasonable costs which they incurred to support my child’s application up to the day that the application is officially withdrawn in writing.**
4. **My signature is evidence of my approval of these conditions.**

Parent/Guardian’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: