



**Samberg Family History Program**

Center for Jewish History  
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[www.cjh.org/education/samberg.php](http://www.cjh.org/education/samberg.php)

**2010 Samberg Family History Program  
June 28 - July 23**

**Program Application:**

Complete the entire application and return it to the Samberg Family History Program. We will give first priority to applications received by **May 1, 2010**. Admissions are on a rolling basis. Your application will not be considered until we have also received all supporting materials, including the Scholarship Form if you intend to apply for financial aid.

**Part I. Biographical Information**

**Date:** \_\_\_\_\_

**Name:**

\_\_\_\_\_  
(First) (Preferred) (MI) (Last)

**Date of birth:** \_\_\_\_\_ **Sex:**  M  F  
(mm/dd/yyyy)

**Home address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Expected high school graduation year:** \_\_\_\_\_

**Name of school:** \_\_\_\_\_  
\_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Type of school (check one):**  Public  Private  Jewish day school  Home school

**Parent/Legal Guardian Information****1. Name:** \_\_\_\_\_**Relationship:** \_\_\_\_\_**Address (if different from yours):**  
\_\_\_\_\_**Home phone:** \_\_\_\_\_**Cell phone:** \_\_\_\_\_**Business phone:** \_\_\_\_\_**E-mail:** \_\_\_\_\_**Occupation:** \_\_\_\_\_**Parent/Legal Guardian Information (cont.)****2. Name:** \_\_\_\_\_**Relationship:** \_\_\_\_\_**Address (if different from yours):**  
\_\_\_\_\_**Home phone:** \_\_\_\_\_**Cell phone:** \_\_\_\_\_**Business phone:** \_\_\_\_\_**E-mail:** \_\_\_\_\_**Occupation:** \_\_\_\_\_

## How did you learn about the Samberg Family History Program?

(Check all that apply.)

- Teacher (name and school) \_\_\_\_\_
- Guidance counselor (name and school) \_\_\_\_\_
- Advertising/press (specify) \_\_\_\_\_
- Friend/relative (name) \_\_\_\_\_
- Samberg alumnus/alumna (name) \_\_\_\_\_
- Jewish organization (name) \_\_\_\_\_
- Internet search (specify site) \_\_\_\_\_
- Our website
- Other (specify) \_\_\_\_\_

### Referrals:

Please tell us the names of any other students you may recommend for this program:

1. Name \_\_\_\_\_ Email: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
2. Name \_\_\_\_\_ Email: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## Part II. Essays

Your responses to the questions below will help us learn about you beyond your grades and recommendation. **Please answer both questions.** Type your essays, double-spaced, and put your name on the top of each.

1. Your response to this question should be approximately 500 words.

Tell a story about your family or a family member. The story can be about something you remember, or something you have heard about, even something that happened before you were born. Why is this story important to you? What does it reveal about your family history? What could someone learn about history in general from reading this story?

2. Your response to this question should be approximately 500 words.

What would you like to gain by participating in the Samberg Family History Program, and what do you have to contribute?

**Part III. Supporting Materials**

These materials may be sent with or separately from your application. However, your application will not be processed until we have received all of the following items:

- An official transcript from your high school
- Scholarship Form, if you are applying for financial aid to cover the \$100 Program registration fee.  
(Please indicate if you intend to do so. \_\_\_\_ )
- A letter of recommendation from a teacher or advisor who is familiar with your academic and/or personal qualifications

The letter of recommendation is **confidential**. If returned with your application, the letter must be in a sealed envelope signed by the teacher across the flap. Be sure to tell your teacher that we accept students on a rolling basis and that timely submission of the recommendation is important.

**Please provide the following information:**

**Name of teacher writing recommendation:**

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**School name:**

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**Address:**

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**Phone:**

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**E-mail:**

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