



**JEWISH  
ENDOWMENT  
FOUNDATION  
OF LOUISIANA**

## **RoseMary and Saul Brooks Fund for Jewish Youth Engagement**

### **2021 GRANT INFORMATION & APPLICATION**

Jewish overnight camp and Israel travel experiences are integral components in building a child's Jewish identity and connecting them to the broader Jewish world. RoseMary Brooks created this fund at JEF with the goal of helping children – those who are physically distanced from synagogues, youth groups and other Jewish community events and activities – increase their exposure to their Jewish heritage and peers during their formative years. Her family is dedicated to maintaining her legacy by making Jewish summer camp experiences accessible for every child.

The RoseMary and Saul Brooks Fund for Jewish Youth Engagement will provide an **incentive grant of at least \$550 for up to ten Jewish children** to attend a Jewish nonprofit sleepaway summer camp annually.

### **ELIGIBILITY & GUIDELINES**

- One parent must be Jewish AND the child(ren) must identify as Jewish
- Residing full-time in Louisiana, outside of a major metropolitan area (including the Greater New Orleans and Greater Baton Rouge areas) for the past year.
- Entering grades one through 12 (after camp).
- Attending a nonprofit, Jewish sleepaway camp.
- One application must be submitted for each child.
- Child(ren) may re-apply every year he/she is eligible.
- Funding is limited and available on a first-come, first-serve basis.
- Applications will be reviewed by a small group, including JEF staff, Board, and a representative of the Brooks family.
- Funds will be paid directly to the camp.

### **APPLICATION FORM**

**DEADLINE: MARCH 31, 2021**

*Complete and email to [debbie@jefno.org](mailto:debbie@jefno.org) or mail to:*

*Brooks Fund, c/o Jewish Endowment Foundation of Louisiana, One Galleria Blvd., Suite 1040, Metairie, LA 70001.*

#### **CONTACT INFORMATION**

##### **APPLICANT:**

Name \_\_\_\_\_

Birthdate \_\_\_\_\_

Gender \_\_\_\_\_

Current Grade \_\_\_\_\_

School \_\_\_\_\_

Camp Name \_\_\_\_\_

##### **PARENT(S)/GUARDIAN(S):**

Name(s) \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

*Application continues on second page.*

**JEWISH ENGAGEMENT**

Are you and your family affiliated with any synagogues or Jewish organizations? If yes, please provide names.

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Do you currently participate in any Jewish activities? If yes, please provide names and frequency.

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**CAMP INFORMATION**

Why did you choose this camp?

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Have you attended Jewish sleepaway camp before? \_\_\_\_\_

If yes, which one(s) and for how long? \_\_\_\_\_

If you do not receive this grant, do you still plan on attending camp? Please explain.

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What do you hope to gain by attending Jewish sleepaway camp this summer?

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How will you use what you learn at camp once you return home?

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If you need extra space to complete any item in this application, feel free to use and attach a separate sheet.