Request for Scholarship

Personal information

Applicant's name: _____

ID/Passport number_____ (please attach copy)

Address: _____

Contact information:

Mobile number _____ Email _____

Additional phone number _____

Education and academic background: (Please attach degrees/certificates)

_____

_____

_____

_____

_____

Can you commit to field work in excavations of ancient Jerusalem during the coming year: Yes/No

Name of institution where you will be registered for continued advanced studies (attach documentation):

1. Recommendations: (please attach)
2. Additional funding: (please note amount and source)

_____

_____

_____

_____

Declaration and undertaking

I, the undersigned, _____, bearer of identity card/passport number _____, hereby declare, in support of the request I have submitted to receive a research scholarship from the Center for Research on Jerusalem (Soba Jerusalem) as follows:

1. **I am not a member of the Soba Jerusalem non-profit organization; I do not work for the organization; and I am not a relative of an organization member.**
2. **All the details in my application are full, correct, and exact.**
3. **I undertake to inform the organization of any change in the details listed.**
4. **I am aware that all the details I have transmitted will be the basis for the decision of the grant committee of the organization to provide research grants.**
5. **Should I receive a grant, I authorize the organization to publicize my receipt of the grant including my photograph.**
6. **I affirm that I have read and understood the grant award policy and undertake to act in accordance with it.**

Date: **Signature:**

_____ _____

Please send: office@ajri.org.il