Student Scholarship to Poland/Auschwitz Sponsored by CANDLES Youth Board

Trip dates: June 22-June 30, 2019

Application deadline: January 11, 2019

Application

VCSC Student Recognition		
I,, have read and understand the expectations and requirements of this scholarship opportunity. If selected, I agree to travel on the required		
requirements of this scholarship opportunity. If selected, I agree to travel on the required dates (Trip A: June 22-June 30, 2019) as part of the CANDLES Auschwitz Trip. I also agree to present my experience and what I learned to my high school in the following academic year. This application, including the essay, is my own work. I affirm that the information herein is true and accurate to the best of my knowledge and belief. The scholarship		
application deadline is January 11, 2019.	benet. The scholarship	
	Date	
(Please print your name here)		
	Date	
(Please sign your name here)		
Parent or Guardian Recognition		
I am aware that is applying for an educational opportunity to (Please print your student's name here)		
travel to Krakow, Poland on June 22 – June 30, 2019 with CANDLES Holocaust Museum and Education Center, and I support his/her application. I am also aware that if the student is under the age of 18, he/she must be accompanied by an adult and that adult will be responsible for their own trip fees.		
(Please print your name here)	Date	
	Date	
(Please sign your name here)		

Mail to: CANDLES Youth Board Auschwitz Trip Scholarship Committee 1532 South Third Street Terre Haute, IN 47802

Or email to Dorothy Chambers: dorothy@candlesholocaustmuseum.org A. Personal Information (Please print or type)

Legal 1	Name
Street	Address
City _	StateZip
Phone	(Cell) Phone (Home)
Email	Address
Age at	time of application Age as of June 23, 2018
High s	chool in which you're currently enrolled:
Your e	expected month and year of graduation is:
If und	er 18, I have a chaperone willing and able to accompany me on the trip.
	Name of chaperone
	Relationship to applicant
B. Let	ters of Recommendation
anyone recom	etters of recommendation are required . While teachers are the usual letter-writers, we rage you to ask others—coaches, dance instructors, pastors, mentors, for example—e not related to you who can describe your suitability for the scholarship. The mendations should be submitted to CANDLES <i>no later than January 11th</i> (See ed form).
1.	Name of person providing recommendation #1
Conta	ct information
2.	Name of person providing recommendation #2
Conta	ct Information

C. Briefly describe your level of knowledge of the Holocaust. How did you gain this knowledge? (Limit 150 words)
D. What aspect of this scholarship opportunity do you find most interesting? How might this trip tie into your future professional or personal life? To respond, you may write an essay (Limit 500 words) or submit a video essay (5-minute maximum).

E. Your Programs and Activities

List any high school activities, community programs, public service, employment, and other activities in which you have participated. Indicate leadership positions held, if applicable.

Activity	Leadership position, if
·	Leadership position, if applicable

F. Briefly describe a personal experience from one of your public service, community, or school activities, which holds special significance to you. Perhaps it was a leadership role or a situation in which you were able to make a positive difference in your school or community. Please explain why it holds special significance (Limit 250 words).
G. Other
Are there any other activities you believe important to this application that are not listed above? If so, please list them here.
What additional information (not already addressed in the application) do you wish to share with the CANDLES Holocaust Museum and Education Center Youth Board scholarship review committee? What makes you unique? Why should the committee select you? (Limit 150 words)

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Recommendation Letter Guidelines

Thank you for agreeing to write a letter of recommendation for this scholarship applicant. Your assessment of the applicant's achievements, reliability, and suitability for CANDLES educational trip to Auschwitz will assist the selection committee.

Please include some the following information, if applicable.

- How long have you known the applicant?
- If you have instructed the applicant, in what course(s)?
- What qualities does this applicant possess that would make him/her a good candidate for this scholarship and educational experience? Please give specific examples as to why you feel as you do.
- Why do you think this experience is valuable for this particular applicant?
- How do you believe this applicant would respond to this intense experience?
- How does this student display maturity?
- Include any other comment(s) that will help the committee with the selection process.

Students or those writing recommendations may hand-deliver, mail, or email the recommendation letter to the following address before the deadline date of **January 11**, **2019**.

Mail to:

CANDLES Youth Board Auschwitz Trip Scholarship Committee 1532 South Third Street Terre Haute, IN 47802

Or email to Dorothy Chambers: dorothy@candlesholocaustmuseum.org

If you have questions, please contact Dorothy Chambers, CANDLES Executive Director at 812.234.7881, or dorothy@candlesholocaustmuseum.org.

CANDLES – Shining a light on the Holocaust and Eva Kor Illuminating the world with hope, healing, respect, & responsibility