



**The  
Handshake  
Foundation**  
EIN 46-4288013

## Educational Grant Application

Please read carefully. If there is not enough room on this application, attach a separate page to give additional details. You can submit your materials by mail or in person to a mentor or organization/school coordinator/teacher.

**4 Rollingwood Dr. Palos Verdes Peninsula, CA 90274**

### Available Grants/Aid

Please indicate to which grant you are applying.

**General Grants/Aid:** for college and or seminar/training courses, vocational and continuing education, exchange-student programs, educational materials, supplies and projects. Yes \_\_\_\_\_ No \_\_\_\_\_

#### Named Grants:

\_\_\_\_\_ Harriet M. Heller Grant for advanced education in performing and media arts

\_\_\_\_\_ Lt. Col. Nathan Heller Grant for dependents of active or reserve military personnel entering any field of study

\_\_\_\_\_ Donna Goldbach Grant for women entering business and industry

\_\_\_\_\_ Sportsmanship Grant for student athlete's continuing education

\_\_\_\_\_ Mark & Jodi Jawitz Grant for entrepreneurs entering business or arts

#### Student Information

Name: \_\_\_\_\_

Permanent address: \_\_\_\_\_

Best E-mail: \_\_\_\_\_ Best Phone \_\_\_\_\_

Date of Birth: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Place of birth: \_\_\_\_\_ Career goals \_\_\_\_\_

Involvement with Organizations/Youth Groups \_\_\_\_\_

\_\_\_\_\_

Organized activities \_\_\_\_\_

\_\_\_\_\_

When do you expect to start your studies/classes/project? \_\_\_\_\_

Summarize your project in detail and how the funds will be used (Attach another sheet if needed) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of school/college to which you are enrolled: \_\_\_\_\_

School Contact \_\_\_\_\_ Phone \_\_\_\_\_

Course of Study \_\_\_\_\_

How much financial aid are you requesting? \_\_\_\_\_

**Parents' /Guardian information**

Father/Guardian's full name: \_\_\_\_\_

Address: \_\_\_\_\_ Email \_\_\_\_\_

Employer: \_\_\_\_\_

Age: \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

Mother/Guardian's full name: \_\_\_\_\_

Address: \_\_\_\_\_ Email \_\_\_\_\_

Employer: \_\_\_\_\_

Age: \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

How many people living with you currently depend on your parent's income? \_\_\_\_\_

**Financial information**

How many people living with you currently depend on your parent's income? \_\_\_\_\_

How much financial income did your family get in the past year from various sources? \_\_\_\_\_

\_\_\_\_\_

