



האוניברסיטה העברית בירושלים
THE HEBREW UNIVERSITY OF JERUSALEM

לחקר מגילות מדבר יהודה
והספרות הקרובה להן
THE ORION CENTER
for the Study of the
Dead Sea Scrolls and
Associated Literature



Date: _____

Scholarship Application Form (Personal Details)

Name: _____

Address: _____

Student ID Number: _____

University/Department: _____

Degree in Progress (status): _____

Project Title: _____

Date of Birth: _____

Israeli ID or foreign passport number: _____

Phone: _____ Cellular phone: _____

Fax: _____

E-mail address: _____

Bank Name & address: _____

Branch: _____ Account no.: _____

Have you applied for additional grants this year? _____

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Office Use _____
