

# **COLLEGE CONNECTION**

**2024-2025**

**Calling all parents and grandparents  
of college age students!!!**

*Stay Connected While Away from Home  
a Temple Judea Sisterhood - WRJ project*



We will send a care package to your child or grandchild to help them stay connected to temple and their faith!

**Parents/Grandparents, sign up your student(s) and they will receive care packages and messages** from TJ Sisterhood throughout the school year that include:

**Care Packages:** Holiday tokens & treats for Rosh Hashanah, Hanukkah and Passover with thoughtful **letters from our clergy** specifically written with your students in mind.

This program is **FREE** to all Temple Judea **PARENTS** and is generously underwritten by TJ Sisterhood.

We are extending this program to **GRANDPARENTS** provided the GRANDPARENT is a member of Temple Judea. To help defray costs, we are respectfully asking grandparents to pay **\$50 / student**.

**Please return this completed form to the Temple office by mail, email or fax, on or before September 20, 2024.**

**If your child is currently enrolled in College Connection, please email their current or new address to [randi@gotj.org](mailto:randi@gotj.org) so they can continue to receive packages.**

*For more information contact the temple office at (561) 624-4633.*

# COLLEGE CONNECTION

\*\*\* For 2024-2025 School Year \*\*\* (All information must be updated annually)

## STUDENT INFORMATION

(Please complete ALL requested information for each student in college)

**PLEASE PRINT CLEARLY.**

**Student Name:** \_\_\_\_\_

College Mailing Address: (must be updated annually)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student Cell Number:** \_\_\_\_\_

Semester Abroad?  NO  YES:  1st  2nd

Food Allergies?  NO  YES: \_\_\_\_\_

Anticipated year of Graduation: \_\_\_\_\_

**Student Name:** \_\_\_\_\_

College Mailing Address: (must be updated annually)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student Cell Number:** \_\_\_\_\_

Semester Abroad?  NO  YES:  1st  2nd

Food Allergies?  NO  YES: \_\_\_\_\_

Anticipated year of Graduation: \_\_\_\_\_

## PARENT CONTACT INFO

(If parent is temple member)

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

Parent Email: \_\_\_\_\_

Parent Phone: \_\_\_\_\_

## For Grandparents:

Enclosed is my check, payable to Temple Judea Sisterhood for \$\_\_\_\_\_ (\$50 / student).

**Note: College Connection is open to students of temple members only.**

Mail completed form to: **Temple Judea Sisterhood - College Connection**

**Attn: Randi Herman**

**4311 Hood Road, Palm Beach Gardens, FL 33410**

or Email scanned form to [randi@gotj.org](mailto:randi@gotj.org) or Fax (561) 624-4076

**PLEASE RETURN FORM BY SEPTEMBER 20, 2024**

**Student Name:** \_\_\_\_\_

College Mailing Address: (must be updated annually)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student Cell Number:** \_\_\_\_\_

Semester Abroad?  NO  YES:  1st  2nd

Food Allergies?  NO  YES: \_\_\_\_\_

Anticipated year of Graduation: \_\_\_\_\_

**Student Name:** \_\_\_\_\_

College Mailing Address: (must be updated annually)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student Cell Number:** \_\_\_\_\_

Semester Abroad?  NO  YES:  1st  2nd

Food Allergies?  NO  YES: \_\_\_\_\_

Anticipated year of Graduation: \_\_\_\_\_

## GRANDPARENT CONTACT INFO

(If grandparent is temple member)

G'Parent Name: \_\_\_\_\_

G'Parent Email: \_\_\_\_\_

G'Parent Phone: \_\_\_\_\_