

Scholarship Application

Confidential

Please complete the following and return to Director of Youth Ministries or the Church Office.

Student name _____

Parent's name(s) _____

Address _____

City _____ State _____ Zip _____

Home phone _____ Grade _____

I am applying for assistance for _____
event name

The total cost of this event is \$ _____

I am requesting help with _____% of the cost (normal maximum is 50%).

Please describe the situation that causes your need at this time. Please be as detailed as possible:
