

Scholarship Application

CONTACT INFORMATION

Name: _____

Parent(s) or Guardian(s) Name _____

Phone _____ School _____ Age _____

Address _____

City, State, Zip _____

E-mail: _____

SCHOLARSHIP INFORMATION

1. Event or activity you are requesting scholarship: _____

2. Why do you want to participate? _____

3. How much does the event cost? _____ How much money are you requesting _____?

4. How will this event/activity help you grow in your relationship with Christ Jesus? _____

5. Are you a Church member? _____

6. What activities, ministries, or meetings do you regularly attend? _____

