

Event Scholarship Request Application

For Youth Ministry Office:

Date Received	_____
Date Awarded	_____
Amount	_____
Source	_____

Name _____

Grade _____

Address _____

Home Telephone _____

Event _____

Amount of financial assistance requested: 25% 50% 75% 100%

Total Dollars Requested _____

Why do you need this scholarship? _____

Please write a paragraph of why you want to attend this event and what you hope to benefit from this event. (Use back of this application)

Signatures:

Student _____ Parent _____

Date _____ Date _____



the youth ministry
@first baptist
norman