



Scholarship Application

Scholarship grants are available for the **program fee** in most cases. Please seek other resources for assistance with travel, housing, and meals. **Please print or type.** Attach additional sheets, as needed.

Conference: _____
Name: _____ Name for name tag: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Email Address: _____
Telephone Number *Primary:* _____ *Other:* _____
Church: _____ City: _____ Presbytery: _____

Have you already registered for this conference? Yes No If yes, confirmation #: _____

Some conferences have designated scholarship funds. Please help us by answering the following question:
Which best describes your racial/ethnic background?

Asian African American Hispanic
 Native American Caucasian Other: _____

If applicable, please give a brief description of your career in ministry: _____

Many churches, presbyteries, and synods offer scholarships. What other sources of income will you be using?

Please state briefly your need for financial assistance: _____

Applicant's signature: _____ Date: _____

Pastor's, Advisor's, and/or Presbytery Executive's Signature and comments: _____

FOR OFFICE USE ONLY

Date received: _____ Date approved: _____ Amt. approved: _____ Approved by: _____
Comments: _____