

**LORD OF LIFE
SCHOLARSHIP APPLICATION**

EVENT: _____

NAME: _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

The cost of the event: _____

The participant will contribute: _____

Amount requested for assistance: _____

Signature of Parent: _____

GUIDELINES:

- **This is a need-based scholarship.**
- **This application should be submitted with individual registration form of the event to one of the Pastor's.**
- **We encourage the Senior High participant to work for as many hours as he/she can above the designated number of fundraising hours for the activity.**

Senior High Youth

I understand that in order to keep this scholarship, I must complete the minimum number of hours that are designated for the activity.

Signature of Senior High Youth: _____