

Students: 5/6 Ministry Scholarship Application

EvFree Fullerton

2801 Brea Boulevard / Fullerton, California 92835 • 714.257.4361

A limited amount of funds are available which will be disbursed among a number of students. Each scholarship application is evaluated based on the individual family need as long as we receive the completed application early enough to provide funds. **Camp Scholarship Application deadline is 2 weeks peior to camp or event.** Please fill this form out completely and return to the Student Ministry office.

The stated deposit for registration is required by the applicant

If we cannot help you financially, we will refund your original deposit.

STUDENT NAME _____

First

Last

ADDRESS _____

Street

City

Zip Code

PHONES _____

Home

Parent Cell

GRADE IN FALL 5 6 _____

PARENT E-MAIL (REQUIRED) _____

EVENT _____ STUDENT HAS ATTENDED EVFREE ____ Yrs. OR ____ Mos.

Family Financial Status

(All information is kept confidential)

Parents' marital Status Single Married Divorced Widowed

Number of Children in your family # _____

Family's approximate monthly income \$ _____

Amount your family is requesting \$ _____

Please write a few sentences briefly explaining your need for a scholarship or your family situation: _____

Parent Signature (required)

Date

OFFICE USE ONLY

Authorized By

Date rec'd _____ Deposit Paid \$ _____ 5/6 Director _____

Amount Awarded \$ _____ Balance Due \$ _____ Admin Asst _____