

P.O Box 969 Montreat, NC 28757 P: 828.419.9829 F: 828.669.5054

## **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:	e: Name for name tag:		
Address:			
City:	State: _		Zip Code:
Lelephone Number Primary	Ć.	Oth	er
Church:	City:		Presbytery:
Have you already registered for	or this conference?	Yes No	If yes, confirmation #:
Is this your first Montreat confe	erence experience?	Yes N	0
Some conferences have design Which best describes your race			by answering the following question:
Asian	African A	merican	Hispanic
Native America	n Caucasia	n 🔲 (	Other:
If applicable, please give a brid	ef description of your o	career in ministry: _	
Many churches, presbyteries,	and synods offer scho	olarships. What other	er sources of income will you be using?
Please state briefly your need	for financial assistanc	e:	
		-	
Applicant's signature:			Date:
, applicant o dignaturo.			
Pastor's, Advisor's, and/or Pre	sbytery Executive's S	ignature and comm	ents:
FOR OFFICE USE ONLY			
	approved:	Amt. approved:	Approved by:
Comments:		·· —	,