

# Scholarship Application

Confidential

Please complete the following and return to the Director of Youth Ministry by email at youth\_ministry@bhumc.org or to the mailbox in the narthex. All scholarship applications must be submitted at least one week prior to the registration deadline. Parents will be contacted by email once a decision is made.

## General Information

Student Name \_\_\_\_\_

Student Email \_\_\_\_\_

Grade \_\_\_\_\_ Phone Number \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Email \_\_\_\_\_

Parent Phone: \_\_\_\_\_

## Student Complete

What do you hope to gain by attending this event?

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Please describe your involvement at Brook Hill. How do you see yourself as an active participant of this congregation?

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## Parent Complete

We would like to provide assistance to as many students as possible, so we ask families to contribute what they can if possible.

Total Cost of Event \$ \_\_\_\_\_

Total amount our family can provide for this event \$ \_\_\_\_\_

Total scholarship amount needed \$ \_\_\_\_\_

**For Staff Review:**

Date Approved: \_\_\_\_\_

Amount Approved: \_\_\_\_\_

\_\_\_\_\_  
Lead Pastor Signature

\_\_\_\_\_  
Director of Youth and Young Adults Signature