Living Hope Church Mission Scholarship Application

Name:	Application Date:
Address:	
Date of Birth	
Marital status	
	Youth (12-18)
	Adult
Phone:	
	ose of the Project:
Destination:	Trip Dates:
Church membership:	
Have you received a Scholarshi	p from Living Hope before?
If so, When and what did you do	o?
Organization or Team Leader:	
	Amount You Can Contribute:
Amount You Can Raise:	Scholarship Amount Requested:
What Other Sources of Funding	Are You Pursuing?
Have you sent out Support lette	rs and do you have pledged supporters?
What other fund raising are you	pursuing?

Why do you want to go on this trip?
In your own words, describe your relationship with Christ. Use scripture:
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What areas are you serving God in your church?
What other areas are you serving God in your community, church or family?
Do you have permission and support of your family?
References. 3 adults, one must be your pastor or youth pastor. Have the references fill out enclosed Reference application.

Certification: In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Required Signatures Applicant:		
Parents (when applicable):		
For missions committee only:		
Notes, concerns, observations		
Mission Committee Members Signatures:		
Amount Granted:	Date	

Living Hope Church Mission Scholarship Applicant Reference Form

Name of Applicant _		Date
Name of Reference a	and Relationship to App	olicant
	ou have knowledge of	the applicant's ability for
How well does the ap	oplicant fulfill his/her co	ommitments?
		applicant's dependability? (1 y dependable.)
On the same scale, r	ate their maturity	Truthfulness
Hard worker	Willing to be hur	miliated for Christ
In your opinion, is thi and spirit? Explain	s person committed to	the work of Christ heart, soul
Any other comments	:	
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