



Scholarship Application

Wilmore Free Methodist Church

Date of Event: _____

Event: _____

Location of Event: _____

Event Leader: _____

Leader's Email: _____

Total Cost: _____ Amount You Are Able to Contribute: _____

Have you discussed your need of scholarship funds with the event leader? _____

Have you previously received a scholarship for a church event? _____

Why do you want to attend this event? _____

Why do believe the Wilmore Free Methodist Church should sponsor you? _____

Applicant's Name: _____

Applicant's Contact Information:

Phone: _____

Email: _____

Address: _____

Office Use

Are scholarship funds available? _____

Has the scholarship been approved? _____

How much has been approved? _____

Has the event leader been notified? _____

Has the financial request form been completed? _____

Amount Granted: _____

Approval Signature _____