Carmel UMC Youth Ministries

Scholarship Application

If you would like to apply for a confidential scholarship to assist with the cost of an activity or trip offered by Carmel UMC, please fill out and return this form to the church office PRIOR to the event. You may also email a copy to kandrews@carmelumc.org

Name of Student: _____

Parent or Guardian Name(s): _____

Phone Number: (_____) _____ - _____

Email: _____

Preferred contact method (circle one) Phone Email

What is the total cost of the event? $_____

How much can you afford to pay now? $_____

Are you able to pay more later? (circle one) Yes No

If "Yes", how much can you pay later and on what date? $_____ Date ___/___/___

What are some of the financial reasons you would like to be considered for a scholarship?

Are you willing (parent and/or student) to volunteer some extra time in the church as a way to repay the money that the church is considering investing in you?

How much time would you be willing to donate?

What kinds of jobs do you think you would be good at?

We will consider your request and contact you at our earliest opportunity at the preferred contact you listed.