

Let Your Light Shine

Youth Scholarship



Instructions: Please print or type. Any youth (Grade 6 through College) is eligible to apply for financial assistance to attend the Fall Gathering of the Florida-Bahamas Women of the ELCA Fall Gathering.

An applicant is encouraged to seek support from her congregational unit and sponsors as well as providing her own contribution to further the success of this grant program.

APPLICANT INFORMATION

Name: _____ Conference: _____

Address: _____ Church: _____

City: _____ FL Zip: _____ Phone: _____

E-mail (if available): _____

As Unit President I have reviewed and support this request.

Unit President Signature: _____ Printed Name: _____



Contribution Schedule

Participant \$ _____

Congregational Unit \$ _____

Other Sponsor \$ _____

Total Contribution Enclosed \$ _____
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Room/Meals \$ _____

Less Contribution Enclosed \$ _____

Total Grant Requested \$ _____

Fees Include:

Room/Meals (participant) (Motel Style Rm.)
(per person/double occupancy)

Grants are awarded as funding permits and are awarded to applicants to supplement the cost of accommodations, meals, and registration fees. Previous grant recipients are eligible to apply.

**RECIPIENT MUST NOTIFY THE REGISTRAR, DIANE CUMMINGS
@ 407-421-4184 IF UNABLE TO ATTEND.**