



## REQUEST FOR SCHOLARSHIP ASSISTANCE

Faith Student Ministries

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### Scholarship Policy

Our scholarships provide assistance to those who would not otherwise be able to attend FSM-sponsored camps, retreats, and trips.

Assistance is normally granted on a partial basis as need is determined. Each applicant is expected to contribute towards the cost of the event to the extent of their ability. It is our hope that everyone who applies will be granted assistance. While assistance may be available later, the opportunity may be missed if the form is turned in after the established due date.

The FSM Scholarship Fund is largely funded by generous donors. Any individual is welcome to make a tax-deductible donation to the FSM Scholarship Fund.

Please complete this form and return it to the FSM office.

## APPLICATION FOR SCHOLARSHIP

\_\_\_\_\_  
Name of Applicant(s)

\_\_\_\_\_  
Event // Dates of Event

\_\_\_\_\_  
Email Address

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

**Total Cost of Event:** \$ \_\_\_\_\_

**Amount You are Requesting:** \$ \_\_\_\_\_

Briefly describe the circumstances making assistance necessary (use back if needed): \_\_\_\_\_  
\_\_\_\_\_

Briefly explain why you (the student) want to participate in this event (use back if needed): \_\_\_\_\_  
\_\_\_\_\_

Are you serving at Faith or in FSM:

Yes, where: \_\_\_\_\_

No

Which FSM activities do you regularly participate in:

The Gathering (Sunday Morning)

Groups (Wednesday Night)

Events (Variety of days and times)

Do you have any personal fundraising planned:

Yes, what: \_\_\_\_\_

No

Have you received assistance from Faith/FSM in the past:

Yes

No

If you are participating in this event as a guest, who are you coming with: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant (or Parent/Guardian/Sponsor)

\_\_\_\_\_  
Dates