

UALC Children & Youth Activity SCHOLARSHIP APPLICATION p1

Instructions:

Return this scholarship application to: UALC, The Church at Mill Run, 3500 Mill Run Dr., Hilliard, OH 43026, Attn: David White. Following receipt of the application, we will contact you by phone or email. This is not a registration form. Please wait to register your child(ren) for the event/activity until after you have heard from us. If you have questions, email David White at dwhite@ualc.org.

Today's Date _____

Household Information: Please provide the following information for your household.

Parent /Guardian Name: Spouse's Name:	Home Phone #
Address	Work Phone #
City State Zip	Cell Phone #
Email address: <i>please print clearly</i>	Best way to contact you:
Church Affiliation: <input type="checkbox"/> None <input type="checkbox"/> UALC Worship Community: _____ <input type="checkbox"/> Other: _____	

Family Information: Please provide the following information for all children under 18.

Child's Name	Birthdate	School Name & Grade

Scholarship Recipient(s) Information: Please list the children for whom you are requesting scholarships.

Name	UALC activity	Tuition Total	Amount requested*

**The maximum scholarship awarded is 50% Tuition Total for events/activities. However, scholarship awards are based on many factors including the number of requests, each family situation, and UALC budget constraints. We may not be able to accommodate all scholarship requests.*

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Additional Information:

What is your relationship to UALC _____

Why do you want your child to attend this event/activity? _____

Please provide any other information you feel would be helpful for the Scholarship Team to know about your child/teen, you or your current life situation. *Use back if necessary.*

Have you received UALC scholarships or material assistance in the past? Yes No

If yes, please describe assistance received:

We may be able to set up a payment plan. Please indicate the amount you are able to pay:

_____ \$25/month _____ \$50/month _____ \$100/month

For Office Use

Reviewed: Date:

Contacted: By: