

Little Country Church
Scholarship Application Form

In an effort to provide financial assistance to as many families in need as possible we provide a wide range of financial assistance options. Please consider the options below carefully and prayerfully.

Applicant Information

Applicant Name: _____ Sex: M / F Date: _____

Parent/Guardian Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Ministry for which you are requesting financial assistance (please circle): **High Sight** **Triumph** **K-Zone**
(Grades 9 – 12) (Grades 6 – 8) (Grades 3 – 5)

Financial Information – To be filled out by parent or guardian

Below is a list of the financial assistance options we have available. You may combine more than one option for your specific situation.

1. *Partial up-front payment*
2. *Payment plans – up to 6 months*
3. *Partial Scholarships*
4. *Full Scholarship – We have reserved this option for families under unusual or extreme financial duress. By selecting this option, you will be receiving a phone call from a pastor or ministry director to discuss your specific financial need.*

Please check the appropriate boxes and indicate the dollar amount next to the appropriate payment option(s) which work best for your financial situation:

1 \$ _____ 2 \$ _____ for _____ months. 3 \$ _____ 4

(For example: for an event with a registration of \$175: 1 \$ 100 2 \$ 25 for 3 months)

Parent/Guardian signature: _____ Date: _____

Thank you for taking the time to fill out this application. You will be notified shortly as to the status of your application.