

# ETHNIC YOUTH SCHOLARSHIP APPLICATION

*The Commission on Ethnic Ministries has set aside funding to encourage racial/ethnic participation in this event. If you are interested in these funds, please fill out this form including your racial/ethnic background. The information on this application will be kept confidential.*

## Important Points:

1. Scholarship applications are due, *with* registration forms, **postmarked NO LATER THAN the Early Bird Registration Date for the retreat you wish to register for.**
2. **Priority** will be given to those scholarship **applications that arrive earliest.**
3. **A \$15.00 refundable deposit must be submitted** with the scholarship application.

\_\_\_\_\_  
Name

(\_\_\_\_\_) \_\_\_\_\_

Home Phone

\_\_\_\_\_  
Street Address or P.O. Box

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

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Your Church (Please no initials)

Grade: 6 7 8 9

Have you attended a Jr. High Retreat before?  yes  no

My racial/ethnic background is: \_\_\_\_\_

**Give specific reasons for applying for this scholarship.** (It is important that these reasons focus on financial need rather than on a desire to go). *The more information you provide, the better.* You may use additional paper if needed.

## Breakdown of Registration Payment (Total cost of the Jr. High/Middle School Retreat is \$55):

My family and I will pay \$ \_\_\_\_\_ toward the registration fee.

My church/youth group will pay \$ \_\_\_\_\_

I would like the scholarship to cover Half \$ \_\_\_\_\_ Partial \$ \_\_\_\_\_

## I have knowledge that this youth is in need of scholarship monies for the JH/MS Retreat.

\_\_\_\_\_  
Pastor/Youth Director Printed Name

\_\_\_\_\_  
Pastor/Youth Director Signature

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

(\_\_\_\_\_) \_\_\_\_\_

Phone Number

Pastor or Youth Director comments.

**Send this application and your deposit promptly by the Early Bird Registration Deadline.**  
**TO: Attn: Jr. High/Middle School Retreat Scholarship, P.O. Box 13650, Des Moines, WA. 98198**