

**St. Matthew Catholic Church
Youth Ministry
Event Scholarship Application**



Part 1 (To be completed by youth or teen)

Participant Name: _____

Participant Grade: _____ School: _____

Participant Email (if applicable): _____

Event you are registering for: _____

Have you participated in Youth Ministry events? Yes No

If yes, please tell us which events or programs?

On the back of this application, or attaching a separate piece of paper, please tell us why you are interested in going to this particular event.

Part 2 (To be completed by parent or guardian)

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Email: _____

Amount of scholarship for which you are asking:

**Please be honest when determining your financial need so that we can assist as many people as possible.*

Full Scholarship Half Scholarship

Partial Scholarship (indicate amount you will be able to pay here): _____

Please briefly explain your need for this scholarship:

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(For office use only)

Amount:

Approved By:

Date: