



SCHOLARSHIP ASSISTANCE APPLICATION FORM

WESTWOOD YOUTH MSM POWER CONNECTION TRIP

JULY 23-28, 2019

Student's NAME: _____ DATE: _____

GRADE: _____ Has your student been on a MSM trip before? _____

Have you received scholarship assistance for a trip from us before? _____

Parents' or Guardians' NAMES: _____

Cell Phone: _____ Email: _____

FULL TRIP COST FOR 2019: \$360.00

What is the total amount your family is able to contribute toward the cost of the trip? \$ _____

What date would you be able to pay that amount by? _____

Would you be willing to participate in an individual fundraiser to help raise money for the trip? _____

Please describe the circumstances surrounding your need for financial assistance:

*Scholarships are not guaranteed and are awarded according to financial need and resources available due to generous donors. As a part of our scholarship program, your student will be asked to write a thank you note to the donor.

YOU WILL BE CONTACTED SOON REGARDING YOUR REQUEST FOR ASSISTANCE.