

**Confidential Scholarship Request For MBC Children's Ministry**

Parent or Guardian must complete this form and return it to a member of church staff.

Parent/Guardian: \_\_\_\_\_ Child: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Does parent/guardian regularly attend MBC for worship? \_\_\_\_\_ for Bible Study/Sun. School? \_\_\_\_\_

Does child regularly attend MBC? \_\_\_\_\_ Who attends with him/her? \_\_\_\_\_

Event for which assistance is needed: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Cost of event: \_\_\_\_\_ Amount requested: \_\_\_\_\_

Amount family will contribute: \_\_\_\_\_ (payment plans are available; discuss this option with church staff)

List extenuating circumstances that affect your ability to pay (job loss, medical expenses, multiple children in family participating, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List MBC fundraisers (fair, chili cook-off, spaghetti dinner, silent auction, etc.) that this child or a representative of this child has volunteered with in the past 12 months:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is an adult from this child's family willing to volunteer at the event or at applicable fundraisers if necessary? \_\_\_\_\_ If so, list name and contact information: \_\_\_\_\_

I am unable to pay the entire cost of this event. I am requesting funding to assist with the cost. I understand that the church may not be able to assist with the cost at this time. If I am offered scholarship money, I will be sure my child participates in the event unless there is an emergency (death in family, illness, or injury) and that I pay my portion of the fee. I will manage my finances as well as find ways to pay for this and future events such as making payment arrangements and fundraisers. I understand that my request for funds will be held in confidence and that it is the desire of MBC that every child be able to participate in church events.

Signature of Parent/Guardian: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Church Staff Only:**

Amount Granted: \_\_\_\_\_ Payment arrangements: \_\_\_\_\_

Family Portion Received: \_\_\_\_\_