

Hardship Scholarship Application

Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone (hm): _____ **(cell):** _____ **(wk):** _____

Please provide the following information regarding your mission effort. This information will be presented to a committee who will determine if your request is granted.

What amount are you requesting? _____

What mission effort have you applied for? _____

Dates of mission effort: _____

Name of Trip Leader: _____

What led you to choose this mission effort? _____

Describe the situation that led you to request this hardship grant. _____

How have you attempted to raise the funds for your trip? If support letters were mailed out, please attach a copy and a list of those to whom they were mailed. _____

When did you begin the process of raising funds for your trip? _____

What sacrifices were made in raising money for your mission trip? _____

When and where was your last vacation? _____
