

HSM Event Scholarship Application



Please note: Each student receiving a scholarship is asked to make the following deposit depending on which event the scholarship is for... \$10 deposit for DNow / \$50 deposit for Camp.

Student's Name: _____ Parent's Name: _____

Home Number: _____ Parent's Cell Number: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Grade of student: _____ Parent's Email: _____

List others living in your home:	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. Why are you seeking a scholarship for yourself/your student? _____

2. What amount of scholarship are you applying for? \$ _____

3. Are you willing to work as a Scholarship Volunteer? If so, when are you available? _____

4. Do you attend church? _____ If so, where do you attend? _____

5. Have you received financial aid or material assistance from Hebron in the past? If so, in what way?

6. Is there a way that Hebron could better meet your spiritual needs? _____

7. In your personal opinion, what do you believe it takes for a person to go to Heaven? _____

I promise that the above information is true and correct to the best of my knowledge. Hebron Baptist Church has my permission to check any of the above information and to use it to determine my assistance.

Signature of Parent: _____ Date: _____

Office Use Only:

Reviewed by: _____ Date Reviewed: _____

Scholarship awarded? Yes / No

Reason for decision: _____