

Application

At Greenville Oaks Church of Christ, a lack of funds should not keep you from attending an event. Complete the following application, as this helps us determine your need and be good stewards with our financial resources. Typically, we can provide some for of scholarship for the event. We have limited resources from which we can provide scholarships. All information Is confidential and we will make every effort to help you.

Contact Information

Student's Full Name:			
Parent's Name(s):			
Phone:			
School:		Grade:	Age:
Address:			
City, State, Zip:			
Email:			
Contact Information			
1. Event for which you are requesting scholars	ship:		
2. Please describe the situation (with as much financial assistance at this time.	ı detail as pos	sible) that caus	ses your need for
3. How long have you attended Greenville Oaks? Qlf you are unable to pay monetarily for this event/trip			
available" pay" off your scholarship. Would you be	interested in se	ervice opportunitie	es?
Teen	Date	yes □ no	For Office Use Only: Date received:
Parent/Guardian	Date		Total scholarship:
Please return completed application to Wes, Michelle	, or the church	office.	Approval: Total Paid back: