

INDIVIDUAL APPLICATION FOR
MISSION SCHOLARSHIP GRANTS
PRESBYTERY OF SHENANGO, PRESBYTERIAN CHURCH (USA)

Form for Individuals Making Application
**(Use *group form* if you are part of a mission group
of two or more from your church.)**

1. Applicants name _____

2. Address _____

3. Phone numbers: Home _____ Work _____

Cell _____

4. E-mail _____

5. Church _____

6. Church Address _____

7. Church Phone Number(s)

8. Date of Session endorsement _____

9. Pastor's Signature _____

Clerk's Signature _____

10. Briefly describe the Mission Project in which you plan to participate. (use another sheet if necessary.)

11. Dates for the mission trip

12. Have you received any previous mission travel grants from the presbytery. If so, please list all grants received with dates.

13. Cost of Mission Trip

- a. Total anticipated cost: \$_____
- b. How much financial support do you expect your church to provide? (give an estimated dollar amount.) \$_____
- c. Total of financial support you expect to receive from all other resources besides your church and the presbytery. \$_____
- d. Balance of the cost you will have to provide (add 11b and 11c and subtract from 11a) \$_____

14. I will endeavor to interpret this mission experience both within my church and to at least two other churches in the presbytery if so requested.

Signature _____