

**Southwest Unity Region Teen Ministry Scholarship Application**  
*From Unity Church of Alhambra Foundation and SW Region Teen Ministry Fund*

This form must be submitted with your church's Group Summary. Scholarships are awarded based on eligibility, application date and funds available. Completion of this application does not guarantee a scholarship grant.

Date: \_\_\_\_\_ Applicant is a: \_\_\_ Teen \_\_\_ Adult Sponsor

Name of applicant: \_\_\_\_\_

Unity Church Affiliated with: \_\_\_\_\_

Church Contact Person & Phone Number: \_\_\_\_\_

Program (Uniteen/Y.O.U.) & Event that scholarship is needed for: \_\_\_\_\_

**Parent/Adult Contact Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cost of the Event: \_\_\_\_\_ Travel Cost for the Event: \$ \_\_\_\_\_

Amount are you requesting for assistance: \$ \_\_\_\_\_ (Scholarships will not exceed 30% of the cost of the event unless specified differently on registration materials or special arrangements have been made with Teen Consultant. Certain events may have different scholarship limits.)

Maximum amount you are able to contribute toward this event: \$ \_\_\_\_\_

Church fundraising available to applicant: \$ \_\_\_\_\_

Is anyone else available to help support/fund event?: \_\_\_ YES \_\_\_ NO

How many members are in your household \_\_\_\_ Adults \_\_\_\_ Children

How many members of the family are attending this event or another regional event within 3 months?: \_\_\_\_\_

What is the reason for applying for scholarship at this time?: \_\_\_\_\_

\_\_\_\_\_

If you do not receive a scholarship, or less than the minimum requested, should we withdraw your event registration?: \_\_\_ YES \_\_\_ NO If no, please explain how you will pay for event: \_\_\_\_\_

\_\_\_\_\_

Did the family/applicant participate in fundraising for this event? Give examples: \_\_\_\_\_

\_\_\_\_\_

Does the family/applicant support the church in other ways? Give examples: \_\_\_\_\_

\_\_\_\_\_

If applicant has previously received a regional teen scholarship, please list when, which event and amount: \_\_\_\_\_

\_\_\_\_\_

Anything else we need to know about the financial support provided by the church, commitment made by applicant/family, or circumstances impacting current situation or future plans? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Event Attendance Required:** Scholarship recipients are credited with funds at the time of the grant. However, scholarship funds are contingent upon participation in the Event. Recipient must attend the Event, **in full**, to qualify for disbursement. In event of cancellation or no-show, Recipient and Church are responsible for payment of cancelled Scholarship Funds or credit to future event does not apply.

**Please note:** This application is not complete without the signature of the Youth Director or Minister and Parent. *Their signatures confirm that they are aware of the financial details, approve this application, and understand that scholarship grants are to be repaid in the event of cancellation or no-show after refund deadline.*

**Parent Signature:** \_\_\_\_\_

**Youth Director/Minister's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Send this form with Group Summary or to:**

**Stacy Macris Ros, Southwest Unity Region Teen Consultant  
2408 Medina Ave, Simi Valley, CA 93063**

**Or in pdf format to: [Stacyunityteens@gmail.com](mailto:Stacyunityteens@gmail.com)**

**For questions, email Stacy at the address above or call her at 818-642-1833.**

**Eligibility:** The SW Region Teen Ministry and the Unity Church of Alhambra Foundation scholarships are offered only to Unity individuals, ministers, ministries and organizations in the Southwest Region (Arizona, Southern California, Southern Nevada and Southern Utah). All applicants must meet the eligibility criteria for the Event, as outlined in registration materials, and be active in a Unity ministry or organization in good standing with the Southwest Unity Region and Association of Unity Church International.

**For Office Use:** Amount Awarded: \$ \_\_\_\_\_ Account: \_\_\_\_\_ Date: \_\_\_\_\_