

Peace Memorial Presbyterian Church 110 S. Fort Harrison avenue Clearwater, FL 33756 727-446-3001

Scholarship Request Form

Thank you for answering the following questions. We know they may feel intrusive, however, we have limited scholarship monies available and are doing our best to be good stewards.

Name of the	requester:	
Scholarship	is requested for:	
Name of the	event:	-
Location:		Date of Event:
Total cost:		
Amount you	have paid/are able to pay:	
Amount requ	uested:	
Without assi	istance, I will:	
be a	ble to attend the event.	
have	e a difficult time raising the neede	ed funds.
will	be unable to attend the event.	
Pastor Bob o		church office at 727-446-3001 and ask to speak with a form with a copy of the registration form to the
	Offic	ce Use Only
Date:	Amount Granted:	Authorized by: