

**PARSONS DISTRICT COUNCIL ON MINISTRIES  
YOUTH SCHOLARSHIP APPLICATION**

**Must be attending a United Methodist sponsored youth programming  
DO NOT APPLY UNTIL YOU HAVE REGISTERED FOR YOUR EVENT**

Name \_\_\_\_\_

Address \_\_\_\_\_

Parents name and address: \_\_\_\_\_

\_\_\_\_\_

Church \_\_\_\_\_

Pastor \_\_\_\_\_

Other scholarships applying for: \_\_\_\_\_

\_\_\_\_\_

Funds requested to attend: (Please circle one)

Camp Chippewa

Youth Mission Study Tour

Institute

Camp Horizon

Cooperative School of Christian Mission

Other UM youth program \_\_\_\_\_

Short statement on why you want to attend: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have registered to attend \_\_\_\_\_yes \_\_\_\_\_no

**Funds will be sent directly to the place you are attending.**

\_\_\_\_\_  
Youth signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Pastor's signature

**(THIS IS A ONCE A YEAR SCHOLARSHIP- youth may only apply  
for one scholarship each year.)**