



Super Youth Spectacular 2009 Archbishop Appeal Scholarship APPLICATION FORM



Applicants: The maximum amount of this scholarship grant will be \$35.00 per person and will be awarded to Youth and Adult Leaders who will be attending the event on Feb. 7, 2009. The total amount of the scholarship granted will be deducted from the total amount due for the event.

Parish/School: _____

Street Address: _____

City: _____ Zip code: _____

Best Contact #: _____

Pastor/Principal: _____

Coordinator of Youth Ministries: _____ Email: _____

Please Fill in the following:

____ Number of Youth in need of scholarship (Please list names on the back) Changes OK

____ Number of Adults in need of Scholarship.

____ I need help with transportation (Rural parishes only) How much? \$_____

____ Total Dollar amount

____ I have attached a note of explanation**

(Signature) Date: _____

Application Process

- 1) Contact Youth Office and get application
- 2) Complete Application and Fax or mail to: Office of Youth & Young Adult Ministry 2718 W. Woodlawn Sa, TX 78228 Fax 735-2695
- 3) Receive acknowledgement e-mail
- 4) Determination made as soon as we receive the Application. You will be notified within 5 Days
- 5) Send in your check for the Balance due after scholarship \$ Amt.

** Just a brief note if you feel there is something we need to know to make a fair assessment.

Please return completed form to Rich Mazzara, Office of Youth & Young Adult Ministry, 2718 W. Woodlawn, San Antonio, TX 78228 or Fax 735-2695 on or before January 26, 2009.

FOR SYS SCHOLARSHIP COORDINATOR USE ONLY

This application was **NOT** approved for Scholarship funds.

This application **WAS** approved for Archbishop's Appeal Scholarship funds for a total of \$_____

Signature: _____ Today's date: _____

First Name

Last Name

Youth or Adult

Best Contact #

First Name	Last Name	Youth or Adult	Best Contact #

FOR SYS SCHOLARSHIP COORDINATOR USE ONLY

Notes: _____

