

*Start children off on the way they should go, and even when they are old, they will not turn from it.
Proverbs 22:6*

Scholarship Application

Parent/Guardian Name:

Parent/Guardian Name:

Names of All Household Members

Age of Children

**Attending CKCA
Current Grade (if applicable)**

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

Phone Number

Email Address

Mailing Address

Adjusted Gross Income: _____

(Please Attach Proof of Income)

Other Scholarships/Aid Applied: _____

Number of Family Members Claimed on Income Return: _____

Reason for Request/Any Special Circumstances: _____

By signing, I agree to the following terms:

Applications will be reviewed confidentially. Applying is not a guarantee of receiving any form of assistance. Rather, it is an opportunity to share your need with potential scholarship providers. Please call (620) 792-2209 with any questions.

- All Prior and Current Charges on Account Are Paid

Parent Signature

Date

Please Drop Off at USA Gym Supply Office (319 McKinley) or Mail to P.O. Box 847, Great Bend, KS 67530

All your children will be taught by the LORD, and great will be their peace. Isaiah 54:13

Name/Amount of Scholarships/Aid Received (OFFICE ONLY): _____