CENTRAL STATES CONFERENCE

Elementary/Academy Application Form

* Please make sure you read the Scholarship Guidelines before sending the application.
* Submit this form no sooner than September 1st and no later than October 1st of each year.
* One name per application, please. If you are a college student, please use the College Application Form.

Student's name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_

Date of Birth: 

Name(s) of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status (circle one): Grade K 1 2 3 4 5 6 7 8 9 10 11 12

Name of School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current GPA (Academy) \_\_\_\_\_\_\_\_

Home Church: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you received a CSC scholarship before? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ For what amount? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Note: Students applying for scholarships must comply with all the rules and regulations Listed in the guidelines. There will be an effort to equally allocate scholarship monies throughout our Conference territory and between new and previous applicants. Please submit this application in a timely manner.

TO BE COMPLETED BY LOCAL CHURCH

Church Board Meeting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pastor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Enclosed: \_\_\_\_\_\_\_\_\_\_\_\_

DATES and SIGNATURES A-RE REQUIRED ON EACH BLANK. Applications containing false information will be considered invalid, and the applicant will be prohibited from future scholarship programs in Central States. If you have any questions, call 913-371-1071.

Please mail or bring application to:

Superintendent of Education

Central States Conference of Seventh-day Adventists

3301 Parallel Parkway

Kansas City, KS 66104