

## Greater New York Conference Office of Education

3-Way Scholarship Application for: 2023-2024

## Kindergarten – 8<sup>th</sup> grade students

## **Guidelines:**

- o This application only applies to Greater New York Conference elementary (K-8) students.
- The church can fund students any amount it chooses; however, a church contribution up to \$200 will be matched by Greater New York Conference and its participating K-8 school.
- o The deadline for applications and checks received by the Office of Education is: Wednesday, November 30.
  - Please note that applications received after November 30 or without a check are not guaranteed the scholarship.

TO BE COMPLETED BY PAR	RENT/GUARI	DIAN:			
Name of Student:					
Last Name		First Name		Name of Church Attending	
Name of Parents:					
Last Name		First Name (Father)		First Name (Mother)	
Mailing Address	City	State	Zip Code	Phone Number	
Name of school student atte	nds:				
		(Indicate GNYC elementary school)			
Financial Information: Names of Dependent Children	Grad	le S	chool Attending	Cost Per Month	
Husband's Income: Yearly: \$	OW: at the contac	Mon <b>★<u>At</u></b> t, educationa	ıl, and financial	ent: \$  Other Proof of Income  information is an accurate	
Signature:	(Parent/Guardian)		Date:		
Instructions to Parents/Guar secretary. All applications must be ap  TO BE COMPLETED BY THE  (This section must be completed for co	dians: Please oproved by the c	e send your cor church board to OARD:		Do not write below this point	
		Signature of	the Church Board	Chairperson	
INSTRUCTIONS TO CHURCH	I BOARD: Ap	proved appl	ications are to be		