

Greater New York Conference Office of Education

3-Way Scholarship Application for: 2023-2024

## **Greater NY Academy & University Students**

## **Guidelines:**

- This application only applies to a Greater NY Academy and University students.
- The church can fund students any amount it chooses; however, for Greater NY Academy (GNYA) applicants, the conference will match the church's portion up to \$350. The third portion will be matched by GNYA or the participating SDA college/university.
- The deadline for applications and checks received by the Office of Education is: Wednesday, November 30.
  - Please note that applications received after November 30, 2023 or without a check are **not guaranteed** the scholarship.

TO BE COMPLETED BY Stud	lent or Parent/	Guardi	an:	
Name of Student:				
Last Name		First Name		Name of Church Attending
Name of Parents:				Last Name
	Fi	irst Name	e (Father)	First Name (Mother)
Mailing Address	City	State	Zip Code	Phone Number
Name of school student atter	nds:			
FINANCIAL INFORMATION TO DE	COMPLETED BY		Greater NY Academy o	
Names of Dependent Children	Grade	PAKEN I	School Attending	Cost Per Month
		_		
Husband's yearly income: \$ *Attach IRS-1040 or other proof of	Wife's yearly in	come: \$	Monthly	Mortgage or Rent: \$
*Attach IRS-1040 or other proof of	fincome for financ	cial eligibi	lity.	
Please sign below if the above co	ntact, educationa	al, and fi	nancial information i	s accurate.
Signature:			Date:	
Signature:(Student or Parent/Guardian)			_	
Instructions to Student/Parei secretary. All applications must be applications must be applications.				
TO BE COMPLETED BY THE			//_	<u> </u>
(This section must be completed for co	onfirmation of action	on)	Date action was tak	en Amount Approved
Check #				
	Siç	nature (	of the Church Board	Chairperson
INSTRUCTIONS TO CHURCH the GNYC Office of Education by	• •	_	='	sent, with the check, to