

## Scholarship Application (Revised 8.2017)

50% Scholarship of ALTD Retreat Fee

SCHOLARSHIP APPLICATION FOR ABUNDANT LIFE TRES DIAS WEEKEND				
(Please indicate wh	nich weekend	the scholarsh	ip would be applied	d toward.)
MEN'S WEEKEND	) #	Date of Re	treat	
WOMEN'S WEEK	END #	Date of Re	treat	
	** PLE	ASE PRINT CL	EARLY **	
1. PERSONAL INFORMATION	<u>l</u> :			
Name of Sponsor:				
Address		City	State	Zip
Home phone( ) E-mail address_	Work phon	e( )	Cell phone (	)
Name of Participant to Receive				
How long have you known the a				
Related? How rel	lated?			
Has their registration applicatior	n already been	submitted? Y	N	
**Participants who have already	reaistered for	the weekend w	vill be given priority.	
	**Scholarship	Application D	Deadline**	
All scholarship applications mubefore the weekend to be consi	st be in the ha dered. The cu	nds of the Pre-	weekend chair prior fee after 50% schola	
Jennife 1821 Sherwood Dr			kend Chairman - e-mail: <u>kodlj@b</u>	<u>eloit.edu</u>
Secretariat Use Only: Da	ate Received _	Date I	Request Approved/D	eclined