



*MDRC Student Ministry*  
**Mission Trip/Retreat  
 Scholarship Application**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Student Cell#:** \_\_\_\_\_

**Student Email:** \_\_\_\_\_

**Parent(s):**

**Name(s)** \_\_\_\_\_

**Email(s)** \_\_\_\_\_

**Trip/Event Name:** \_\_\_\_\_ **Date(s):** \_\_\_\_\_

**Total Cost of Trip:** \_\_\_\_\_ **Amount Requested:** \_\_\_\_\_

**Reason(s) for scholarship request:** (Employment circumstances, multiple family members going on same trip, financial situation, other). Use back of page for more room:

<b>Office use only</b>		
Scholarship Granted: _____	Amount Granted: _____	Staff: _____
Scholarship Denied: _____	Reason Denied: _____	

Email completed form to Connie Adams ([connieadams@meredithdrive.org](mailto:connieadams@meredithdrive.org)) or mail to :  
 Meredith Drive Reformed Church  
 Attention: Connie Adams  
 5128 Meredith Dr  
 Des Moines, IA 50310