



## SCHOLARSHIP AND SPECIAL PROJECT REQUEST FORM

Please fill out the information as completely as possible.

Name of Church: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Description of proposed project or scholarship event: \_\_\_\_\_  
\_\_\_\_\_

Date and location of project/event: \_\_\_\_\_

Who is the main target group or attendance group? \_\_\_\_\_  
\_\_\_\_\_

What resources will your church/mission provide for the project? \_\_\_\_\_  
\_\_\_\_\_

How will you use Associational funds? \_\_\_\_\_  
\_\_\_\_\_

What is your prospect follow-up plan? (Note: You are strongly urged to provide a follow-up report to the association. Approval of future requests for assistance will be contingent upon receipt of a follow-up report.):  
\_\_\_\_\_  
\_\_\_\_\_

Assistance requested: \$ \_\_\_\_\_ Assistance approved: \$ \_\_\_\_\_

Signature of Church Officer or Pastor: \_\_\_\_\_

**Mail Requests to:**

**Heartland Church Network  
P. O. Box 6157  
Omaha, NE 68106**

\_\_\_\_\_  
*DoM or CPC signature*

\_\_\_\_\_  
*Date*

Follow-up report received. Date: \_\_\_\_\_