

**YOUTH SCHOLARSHIP APPLICATION**

Last Name, First Name, Middle Initial \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Date of Birth (and age) \_\_\_\_\_  
 Home Phone \_\_\_\_\_  
 Cell Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Name of Parent/Guardian \_\_\_\_\_  
 Parent or Guardian phone/email address \_\_\_\_\_  
 Today's Date \_\_\_\_\_

**INQUIRY DETAILS**

In which Diakon program(s) did you participate?

<input type="checkbox"/> Wilderness Challenge	<input type="checkbox"/> Bridge Program
<input type="checkbox"/> Weekend Alternative	<input type="checkbox"/> Turning Point
<input type="checkbox"/> Center Point	<input type="checkbox"/> Flight
<input type="checkbox"/> In Home Services	<input type="checkbox"/> Foster Care and/or Adoption
<input type="checkbox"/> Family Life Services	<input type="checkbox"/> Other (please describe) _____

Please provide the details of your request:

Item requested (ex. tuition, books, rent)	Exact amt. requested for each item
_____	_____
_____	_____
_____	_____
_____	_____

- \* Supporting documentation in form of copy of college bill or receipt required with submission.
- \* If you are requesting support with rent, you must provide a signed renter's agreement.
- \* Your request may not exceed \$3,000 in a calendar year.
- \* Allow 4-6 weeks for your application to be processed and reviewed and checks issued

## ESSAY QUESTIONS

Response should be two pages double spaced and address all of the following:

1. How did Diakon programming help you? What are a few of your favorite memories?
2. What are your future plans, in terms of a career?
3. Why is this scholarship important to you?
4. How do you plan to use the funding available?

## SCHOLARSHIP REQUIREMENTS

1. You must have participated in a Diakon program (you did not have to complete the program to be eligible). In addition, current Diakon employees who are graduates of or former recipients of Diakon Child, Family & Community Ministries services are eligible for up to \$1,200 per year in scholarship funding (as well as being able to use Diakon's Tuition Assistance Program).
2. Refrain from illegal activity of any kind.
3. Provide documentation of acceptance or enrollment at a college, trade school or certification/training program (attach a copy with this application).
4. Have completed and submitted, F.A.F.S.A. form\* – the standard financial aid form used to determine additional financial aid needed for college or trade school (attach a copy with this application).  
*\*If you need assistance, contact your guidance office or your college's financial aid office.*
5. Fully complete application, including the two-page essay.
6. Provide documentation of expenses (receipt, college bill, renters agreement).
7. If you have received support from the Diakon Youth Scholarship before, you have the additional requirement of providing a copy of your transcripts showing a 2.0 GPA "C" average in order to be eligible to reapply.

***Complete this form and forward all relevant forms and documentation to:***

c/o Diakon Youth Scholarship Review Team  
571 Mountain Road, Boiling Springs, PA 17007  
Email: [scholarships@diakon.org](mailto:scholarships@diakon.org)

**DO NOT WRITE BELOW THIS LINE**

Date application was received \_\_\_\_\_

Staff who accepted application: ED Adoption Foster Care \_\_\_\_\_

ED Family Life Services \_\_\_\_\_

ED Adjudicated Youth Services \_\_\_\_\_

Date forwarded to Review Team \_\_\_\_\_

Review Team recommendation: Approved \_\_\_\_\_ Denied \_\_\_\_\_

Need additional information \_\_\_\_\_

Comments: \_\_\_\_\_

Date forwarded for approval to Senior Management \_\_\_\_\_

Date approved \_\_\_\_\_

Payer source information \_\_\_\_\_