



**Clemmons United Methodist Church  
SCHOLARSHIP APPLICATION  
For Mission & Outreach Special Fund Requests**

**VISION:** Alive in Christ's love-Growing as Disciples; All called and gifted by God

**MISSION:** We exist to reach out with God's love, to connect and equip all as transformed disciples of Jesus Christ for service in the world.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a Clemmons United Methodist Church member? \_\_\_\_\_

How long have you been a member of CUMC? \_\_\_\_\_

Please list any ministries, classes or activities in which you are involved at CUMC

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Please give a brief overview of circumstances that make it difficult for you to cover the full cost of the trip. Check any that apply and write whatever explanation you feel comfortable providing:

Current income level doesn't support the full cost of the trip

Single parent

Loss of job or Cut in Salary

I am hoping to take multiple family members on the trip and am unable to cover the cost for all

\_\_\_Other: Please explain below.

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Dates of trip \_\_\_\_\_ Destination \_\_\_\_\_

Trip purpose \_\_\_\_\_

Please share your personal expectations for this trip. How do you hope to be used by God in this experience?

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Please share a bit as to what motivated you to pursue this trip and any skills you feel you can utilize.

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Please describe any previous mission trips you have taken.

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Total cost of trip \$ \_\_\_\_\_ Have you paid the deposit? \_\_\_\_\_

How much? \$ \_\_\_\_\_ Portion of trip you are able to cover \$ \_\_\_\_\_

Amount you are requesting \$ \_\_\_\_\_

Have you previously applied for a scholarship? \_\_\_\_\_

If so, did you receive funding? \_\_\_\_\_ How much was received? \_\_\_\_\_

**I understand and agree to the terms in the MOST Scholarship Application Policy.**

Trip Participant: \_\_\_\_\_ Date: \_\_\_\_\_

(Print and sign)

