

EDUCATION DEPARTMENT 2022 Scholarship Program

Promptly Forward to: IFCA Education Department Attn: David Belles 25595 Chardon Road Richmond Heights OH 44143

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2022 Student Application Form (Deadline: 07/31/2022)

Full Name:	Date of Birth:	
Full Address:		
Phone Number:		
If applicable, please indicate your e-mail address:		
Marital Status: Name of parent or legal guardia	an:	
Name of your Church: Pasto	r:	
1. What accredited school & educational major are you enrolled in? number or Social Security number.)	(You must provide full	address of school and Student ID
2. What are your educational / Ministerial goals?		

3. Have you previously applied for an IFCA scholarship? (If YES, state year, whether you were granted an award, and amount)

4. Have you attended recent IFCA Conventions, Apex, District Youth Camps, or Church Mission?		
Are you active in your local church and IFCA Yo	outh Ministry? (If YES, please state your activities I ministries.)	
	dentials? ne number of one adult character reference (not your Pastor or a family	
member)?		
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a i i i		
ur Signature X	Date	
under age 18, also include your parent's or guard	dian's signature.	

Application: X ______Date: _____