

Deadline: **WEDNESDAY, APRIL 15, 2009**

Submit to:

Please read *Form 15 NCYC Scholarship Application Instructions* prior to completing this application. Representatives of the parish, school, or organization applying for NCYC scholarship funds should complete Form 16. Submit it and the narrative to the diocesan director of youth ministry by **Wednesday, April 15, 2009**.

Please print.

Parish, School or Organization _____

Diocese _____

Name of Person Submitting Application _____

Address _____

City/State/Zip Code _____

Daytime Phone _____ Email _____

Please complete the chart below. If actual amounts are not available, use prudent estimates.

		Youth	Adult
A	Number of People to be Funded by this Application		
B	Diocesan Package Cost Per Person	\$	\$
C	Credit Per Person: Diocesan Subsidy	\$	\$
D	Credit Per Person: Parish/School/Organization Subsidy or Fundraising	\$	\$
E	Credit Per Person: Paid by the Individual	\$	\$
F	Credit Per Person: Other (please specify)	\$	\$
G	Total Per Person Credits (add rows C, D, E, and F)	\$	\$
H	Projected Per Person Scholarship Need (subtract row G from B)	\$	\$
I	Total Scholarship Request (add youth and adult amounts in row H)	\$	

J. Please attach a narrative that explains why this parish, school, or organization is requesting scholarship funds and who these funds will serve. Explain how the scholarship money will help develop or support the local and/or diocesan youth ministry efforts. Refer to the scholarship criteria to support reasons for requesting scholarship funds. Do not include the names of youth or adults who may receive scholarship funds. Please limit the narrative to one double-spaced typewritten page.

Signature of Applicant _____ Date _____

Submit this form to your diocesan director of youth ministry.

ALL SCHOLARSHIP APPLICATIONS FROM YOUR DIOCESE MUST BE SUBMITTED TOGETHER BY THE DIOCESAN GROUP LEADER USING FORM 14: DIOCESAN SCHOLARSHIP SUMMARY TO BE CONSIDERED.