

GA-Lina Walk to Emmaus Team Member Scholarship Request Form

To the Members of the Scholarship Committee:

Date: _____

Note: Fill in blanks or circle the items that apply.

I, _____ hereby request a full/Partial scholarship in the amount of \$ _____ in support of Walk # _____. I attended Walk # _____ and sat at the Table of _____.

This request is made due to: loss of job, financial hardship, unexpected medical expenses, or (other): _____.

I understand that I may not request scholarships for two consecutive walks. I previously requested a scholarship: Spring/ Fall _____. I have not previously requested a scholarship.

Sincerely,

Printed Name: _____

Signature: _____

Instructions: Compete and submit to the Board Representative of the Walk you are requesting a scholarship to attend.

Your request must be submitted no later than the 3rd week of training.

Your request will be reviewed by a Scholarship Committee and the results of Board's decision will be provided as soon as possible.

DeColores,