Scholarship Application

Thank you for your interest in Becoming the Crown Jewel. We strive to make the Becoming the Crown Jewel experience available to all interested young ladies, regardless of her ability to pay. Through God's grace and providence, all of our girls' needs have been provided for in previous years. In order to help us make sure our neediest girls receive the most assistance, please complete the following application. All information should be based on the participant's household. Please be sure to fill out the form in its entirety. Responses to the following questions will be kept confidential.

Please mail this application along with participant's registration form to:
Becoming the Crown Jewel
PO Box 859
Guyton, GA 31312

You will receive a phone or e-mail notification within 7-10 days of receipt of scholarship application **and** conference registration.

Participant's Name _____
Grade 6 7 8 9 10 11 12 Church Affiliation _____
Parent's Name(s) _____
Parent's e-mail _____
Daughter's e-mail _____
Address _____
City_____ State_____ Zip Code _____
Home Phone_____ Parent's Cell Phone_____
Application completed by/relationship (if not participant)
_____

Scholarship requested: (Conference fee is $80)
Full _____Partial _____ If partial, amount requested _____
Number of people in household: Adults _____
Children _____
Household Income: _____ per month _____ per year
Does anyone in the household receive any of the following (please check all that apply): SSI _____ AFDC _____ WIC _____TANF _____
Food Stamps _____ Free/reduced lunch _____

Please write a brief essay as to why you (or the participant) should receive a full or partial scholarship to Becoming the Crown Jewel: