



Christian Educational Consortium Scholarship Application
2019-2020

This application (with all accompanying documents) must be submitted by July 15, 2019, in order to be considered.

Parent Information:

Mother:	Father:
Name _____	Name _____
Address _____	Address _____
City _____ State _____	City _____ State _____
Zip _____ Phone _____	Zip _____ Phone _____
Email _____	Email _____
Social Security Number _____	Social Security Number _____

Names and ages of children in the family. _____

Date of Application _____ If you have received scholarship assistance in the past please give details below:

For how many classes are you seeking scholarship assistance in 2019-2020? _____

Students seeking scholarship assistance at CEC:

Student 1:

Full Name _____ Date of Birth _____

Grade _____ Current CEC student? _____ yes _____ no. If so, for how long? _____

Please list the CEC classes this student will be registering for in the coming school year (2019-2020):

Has this student already registered at CEC for the 2018-2019 school year? _____ yes _____ no.

Student 2:

Full Name _____ Date of Birth _____

Grade _____ Current CEC student? _____ yes _____ no. If so, for how long? _____

Please list the CEC classes this student will be registering for in the coming school year (2019-2020):

Has this student already registered at CEC for the 2018-2019 school year? _____ yes _____ no.

(Attach a separate sheet for additional students seeking scholarship.)

Required Supporting Documents:

- Detailed copies of all pages and schedules of your most recent Federal Income Tax Return which lists this student as a dependent.
- Two letters of recommendation from teachers, pastors, or someone else who has supervised this student.
- Letter of explanation for need—please include any unusual or extenuating circumstances that would affect the committee’s decision for scholarship award.

Parent Participation Preference:

Parents of scholarship recipients are required to be involved at CEC. Please indicate your preferences from the list of categories below.

- Help in the CEC office
 - Assemble guideline booklets in August
 - Assemble family directories in September/October
 - Help with spirit wear paperwork
 - Any
 - Help with on-campus monitoring of students
 - other (please indicate an area of special interest or expertise through which you would like to help CEC)
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I/we declare that the information on this form is true, correct, and completed to the best of our knowledge. Only the scholarship committee of the Christian Educational Consortium’s board of directors will see or receive any information about this application or its attachments.

Father’s Signature _____ date _____

Mother’s Signature _____ date _____

Please submit this application with ALL supporting documents in one envelope to

**Cathy Wills, Scholarship Committee
Christian Educational Consortium
2903 Redbud Court
La Grange, Kentucky 40031**

Questions? Cathywills0@gmail.com or 502-648-7511