



Mid America Dharma

Scholarship Application

Name _____

Address _____

City, State, Zip _____

Phone _____ Date _____

Please answer the following five items:

1) I am requesting scholarship consideration for the retreat led by:

_____ at _____

dates attending _____

2) I am making the required deposit of \$ _____, leaving a balance of \$ _____.

3) I am requesting a _____ Partial Scholarship for \$ _____

_____ Supporting Scholarship for \$ _____

4) Please describe your financial situation and your reasons for applying for a scholarship. The more information you can give, the better we can assess your need. (Are you self-supporting? Are you on a fixed income? Do you have dependents? etc.) _____

5) Could you provide service during the retreat (helping with registration, maintaining supplies during the retreat) as part of your scholarship? _____

Please return the registration form with the required deposit to the retreat registrar.

Please return this scholarship application to: Joe McCormack, 2756 County Road 338, New Bloomfield, MO 65063, Phone (573) 491-3431, E-mail: metta41856@embarqmail.com.