APPLICATION



NPUC Hispanic Scholarship Program for Families in Need

(Check O	ne)					
	Elementary	(Church = $\$100$, Scho	bol = \$300, NPUC	= \$300, TOTAL = \$700)		
	Secondary	(Church = $$200$, Scho	ool = \$600, NPUC	= \$600, TOTAL $=$ \$1,400)	
Date of Applic	cation:	School Year:				
Student Name	:					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Last		First	Middle		
Home Mailing	Address:					
			Street, Box, or Route	2		
	City		State	Zip		
Name and add	lress of sponsori	ng church:				
			Name			
	Street, Box, or Route					
	City		State	Zip		
Name and add	ress of school:					
			Name			
	Street, Box, or Route					
	City		State	Zip		
Approval of	supporting chur	ch:				
		Signature		Position	Date	
Approval of	supporting scho	ol: (By signing below,	you verify receij	pt of the church portion.)	1	
		Signature		Position	Date	
	ECTIONS:					
DIRI		section of the application	for each student.			
	•	olication to the local churcl		gnature of church official.		
	 Take the application with the church official signature to the school for approval and submission. 					
		The school must approve the application and <u>certify that they have received the church portion</u> .				
	5. This application					
	• •	,		before September 15, 2021.		
			•	plarship if students discontinue	enrollment.	