

# 2022 Prairie Valley Legacy Fund Scholarship Application

One Form Per Applicant

Prairie Valley was a rustic, church-owned, camping facility serving the Presbyterian congregations in the south and west ends of Grace Presbytery. When the property was sold in 2010, per a prior agreement, the proceeds reverted to First Presbyterian Church, Fort Worth, with the proviso that the money be used to provide "a program of Christian camping." The Prairie Valley Legacy Fund Scholarship was created and provides churches and families in Grace Presbytery the opportunity to apply for assistance to send children and youth to PC(USA) camps and conferences.

Families may request need-based scholarship assistance up to 50% of the total camp/conference fee, and applications must be completed in full and submitted by **USPS mail to Gary Holloman, 6100 Colwell Blvd.; Suite #100, Irving TX 75039** or by **email to: [PVLf@gracepresbytery.org](mailto:PVLf@gracepresbytery.org)**

Scholarship Applications are due no later than 15 days prior to the camp/conference start-date. Applications cannot be considered after an event has occurred.

Today's Date: \_\_\_\_\_ Date of Camp/Conference: \_\_\_\_\_

Name of Camp/Conference: \_\_\_\_\_ Location of Camp/ Conference: \_\_\_\_\_

Student Name (for whom scholarship is needed): \_\_\_\_\_

Age of Student: \_\_\_\_\_ Current Grade in School: \_\_\_\_\_

Student's Home Congregation (Name & City): \_\_\_\_\_

Student's Church Leader (Name & Contact Info): \_\_\_\_\_

Scholarship Request: \$ \_\_\_\_\_ Total fee for camp/conference: \$ \_\_\_\_\_

Reason financial help is needed (use back of page if necessary): \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Email address: \_\_\_\_\_

Parent/Guardian/Staff Signature: \_\_\_\_\_

**Applicants are expected to seek scholarships from their local church before applying for Prairie Valley Legacy Funds. This box must be completed by a church representative in order to be considered for funding (Pastor, Educator, Children or Youth Pastor, or church officer).**

Congregation: \_\_\_\_\_ City: \_\_\_\_\_ Amt. received from church \$ \_\_\_\_\_

**\*Signature of Pastor, Educator, Children or Youth Leader, or Church Officer:** \_\_\_\_\_

*My signature also verifies the applicant's need for scholarship assistance.*

**\*Date:** \_\_\_\_\_

**Who should we communicate with about this scholarship? Please make sure your information is legible.**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Please Check:**

**I understand that approved scholarship funds will be sent directly to the camp or conference center in their name.**

Office use only:

Award \$ \_\_\_\_\_ Authorized by \_\_\_\_\_ Date \_\_\_\_\_