

RockPointe Church Scholarship Application

Please fill out the information below and submit to the admin office at RockPointe's Central Campus.

Applicant's Name (first, last) _____

Home Address _____ Phone # _____

Intended or Current University _____ College ID # (if applicable) _____

Does your university have a matching program? (Please Circle) Yes / No

If so, please submit the university's partnership scholarship agreement form with this application.
(This can be found on the university website typically.)

If not, please submit university contact information for processing scholarship funds.

Have you consistently served in the Children's Ministry? (Please Circle) Yes / No

What years of your high school career have you served in the Children's Ministry?

(Please Circle) Freshman Sophomore Junior Senior

In what role(s) did you serve in the Children's Ministry?

Have you been actively involved in Student Ministry? (Please Circle) Yes / No

What years of your high school career have you been involved in Student Ministry?

(Please Circle) Freshman Sophomore Junior Senior

In what capacity have you participated in Student Ministry?

(i.e. Sunday am, Wednesday pm, IMPACT, Rocky Point, Summer Bible Studies, Winter Retreat etc.)

Applicant Signature _____ Date _____

Office Use:
As a staff member of RockPointe Church, I certify the above applicant qualifies for the offered scholarship and meets all criteria as stated in the terms and agreement form.

Printed Name _____ Signature _____ Job Title _____ Date _____