



## Student Financial Assistance Application Form

Date: \_\_\_\_\_ Student's Name: \_\_\_\_\_ Applicant's Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

1. Is this for your family or someone else? \_\_\_\_\_

Youth event/trip: Forest Home Summer Camp \*Dates of event: July 6-11, 2025

(Youth events include: Jr High Winter Camp, Sr High Winter Camp, Mission Trips, Jr High Forest Home summer camp-Creekside, High School Forest Home summer camp-Lakeview)

What is the total cost for the event? \$695

Amount of financial assistance needed? \$ \_\_\_\_\_

2. Please explain the reason(s) for the scholarship request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Have you (or the person you're applying for) received scholarship assistance before?

☐ No ☐ Yes If yes, how much and when? \_\_\_\_\_

4. Anything else that would be helpful in assessing your request?

\_\_\_\_\_

\*Note all forms will be held confidentially by Pastor Matt and the information (no names) with a scholarship assistance administration team. Please submit 30 days before trip.

\*\*Students receiving assistance will be asked to submit a brief reflection (also anonymous) on the their experience, shared with supporters of Monte Vista youth and Old Boney Mountain Foundation

I can attest that all of the above information is true to the best of my knowledge:

Signature: \_\_\_\_\_

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

For Office Use Only:

Event:

Total Cost: \$

Scholarship Amount:



Please send completed applications to: Monte Vista Church, 3797 Lynn Rd, Newbury Park, CA Phone: (805) 498-8213, Attn: Pastor Matt Elam, Email: matt.elam@montevistanp.church