

Deadline: **MONDAY, MAY 2, 2011**  
 Submit to: Catholic Faith Formation Office, Attn: Rita  
 Box 4130  
 Omaha, NE 68104

Please read the *NCYC Scholarship Application Instructions* prior to completing this application. Representatives of the parish, school, or organization applying for NCYC scholarship funds should complete/submit this form (Form 15), along with the required narrative, to the diocesan office/director of youth ministry/diocesan group leader by **Monday, May 2, 2011**.

*Please Print Legibly or Type.*

Parish, School, or Organization \_\_\_\_\_  
 Diocese \_\_\_\_\_  
 Name of Person Submitting Application \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

Please provide the requested information below.

		<i>Youth</i>	<i>Adult</i>
<b>A</b>	<b>Number of Participants to be Funded by this Application</b>		
<b>B</b>	<b>Projected Per Person Financial/Scholarship Need</b>	\$	\$
<b>C</b>	<b>Total Scholarship Request <i>(add youth and adult)</i></b>	\$	

Please attach a narrative explaining why this parish, school, or organization is requesting scholarship funds and who these funds will serve. Explain how the scholarship money will help develop or support the local and/or diocesan youth ministry efforts. Refer to the scholarship criteria to support reasons for requesting scholarship funds. Do not include the names of youth or adults who may receive scholarship funds.  
 Please limit the narrative to one double-spaced typewritten page.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Submit this completed form, along with the requested narrative, to your Diocesan Office of Youth Ministry and/or Diocesan Director/NCYC Group Leader no later than May 2, 2011.**

**ALL SCHOLARSHIP APPLICATIONS FROM YOUR DIOCESE MUST BE SUBMITTED TOGETHER BY THE DIOCESAN GROUP LEADER USING FORM 16: NCYC DIOCESAN SCHOLARSHIP SUMMARY FORM TO BE CONSIDERED.**