

## **Carolinas District Heart to Heart Sisters Scholarship Funds Request Form**

*Purpose:* The purpose of the scholarship fund is to provide financial assistance to culturally and ethnically diverse women who wish to attend Carolinas District LWML events which will result in increased participation in LWML activities.

*“Therefore encourage one another and build one another up, just as you are doing.” (1 Thess. 5:11)*

This request form is designed to be used by individuals. Pastors and LWML members are encouraged to distribute this form to any ethnically diverse woman interested in attending LWML district events, but needing financial help to do so. The scholarship fund will cover the cost of the Joy Event registration fee, district camp fees, and District Convention registration fee. All disbursements are based on available monies in the scholarship fund. LWML societies are encouraged to help with any needed transportation or hotel expenses.

**Request must be made two (2) months prior to the event.**

I, \_\_\_\_\_, a member of (church) \_\_\_\_\_  
in (city, state) \_\_\_\_\_ request assistance to attend:

**Check one event per request.**

- 1)    \_\_\_ Joy Event (March, held annually)
- 2)    \_\_\_ Retreat at Camp Linn Haven (August, held annually)
- 3)    \_\_\_ District Biennial Convention (3<sup>rd</sup> week of September in even numbered years)

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

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

Phone: Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

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

Pastor's name and phone number: \_\_\_\_\_

**Please list reason for the request**

Check all that apply

- 1)    \_\_\_ First time attendee with financial needs
- 2)    \_\_\_ Minority with financial needs
- 3)    \_\_\_ Other, please specify

Send to:       Ellore Erwin  
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**You will be advised of outcome one month prior to respective event.**