

GEMS CONFERENCE SCHOLARSHIP FORM

The GEMS Conference Scholarship Fund allows GEMS Girls' Clubs counselors in need of financial assistance to apply for a Leadership Conference Registration Scholarship. GEMS considers it a privilege to invest in the life of GEMS counselors! These funds are available based on generous donations and available as funds permit.

To apply for a Leadership Conference Scholarship, please note these important guidelines and steps.

For an applicant to be considered they must request funds from their church or club as well as contribute to the registration fee themselves.

Step One:	Complete the Leadership Conference registration form online.
Step Two:	Complete this Scholarship Application.
Step Three:	Have your Pastor complete the Reference section of this application.
Step Four:	Have your Pastor mail or email the completed Scholarship Application to
	GEMS Conference Scholarship Committee
	1333 Alger St. SE
	Grand Rapids, MI 49507

or

hello@gemsgc.org

Step Five:	Pray that the Scholarship Committee be filled with wisdom and discernment as they consider all the requests for assistance.
Step Six:	Watch for notification of the scholarship award.
Step Seven:	Send in any remaining balance due to complete your registration,

Questions? Please call GEMS Girls' Clubs at 616.241.5616 ext. 3065

GEMS CONFERENCE SCHOLARSHIP APPLICATION

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Please print clearly. Please do not use pencil.

Proof of other funding sources is necessary to accompany this application. The funds will be allocated according to the amount in the scholarship fund and can only be applied to GEMS Conference registration for the year it is requested.

Applicants Name:	
Name of Club/Church:	
Address:	
City:	State/Province: Zip/Postal Code:
Email:	Phone:
Have you ever received a GEMS Conference Scholar	rship before? \Box Yes \Box No
Have you attended GEMS Conference previously? If	f so, what years?

Please explain the reason you are applying for a scholarship and requesting financial assistance at this time. Please be as specific as possible:

Describe why you wish to attend the GEMS Conference:

Are other team	members from	your club	attending?	\Box Yes	🗆 No

Signature of Applicant:	Date:	
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GEMS CONFERENCE S	CHOLARSHIP APPLICATION			
SCHOLARSHIP	AMOUNT REQUESTED			
Conference Registration Fee: \Box USD	\Box CAD			
Applicant will contribute: \Box USD	\Box CAD			
Club will contribute: □ USD	\Box CAD			
Church will contribute: USD	\Box CAD			
Other contributions: \Box USD	\Box CAD			
Total Amount Requested: \Box USD	\Box CAD			
Will you have other travel expenses (transportation, pass) If yes, please list approximate total: US				
PASTOR REFERENCE				

This section is to be completed by your Pastor or other Church/Club administrator that would like to see you attend **GEMS** Conference.

Why is it important that this applicant receive funds from the GEMS Conference Scholarship program?

How would the applicant benefit from attending the GEMS Conference?

Reference Name/Position:	
Reference Email:	Phone:
Reference Signature:	Date:

SUBMIT SCHOLARSHIP APPLICATION

Please have your reference mail this completed Scholarship Application to: **GEMS** Conference Scholarship Committee or by email: hello@gemsgc.org 1333 Alger St. SE, Grand Rapids, MI 49507