

NOMINATION FORM

SHINING MOUNTAIN CENTER FOR PEACEFUL CHILDHOOD INC.

Nomination and Eligibility Rules

The application must be submitted by an adult, i.e. teacher, academic director, coach, counselor, program director, youth advisor, benefactor, administrator, parent, etc. Only one SMCPD Scholarship, not to exceed \$3,600.00 will be awarded to each child.

Qualified Applicants

Students and youth between 4 and 25 years old are eligible. The Parent or Guardian must provide documented need for services in the SMCPD program, and must demonstrate circumstances that prohibit the applicant from affording the cost of the program i.e. (last year's income as reported on the Federal Income Tax return Form 1040 or proof of public assistance program).

Nominating Person Contact Information

Last Name _____
First Name _____
Address/Phone/Email _____

Applicant Personal Information

Last Name _____
First Name _____
Parents: _____
Mother: _____
Father: _____
Address/Phone/Email _____

Applicants Date of Birth _____
Place of Birth _____

Current School Enrollment for Applicant

School Name _____

School Location/Address Current Grade _____

