

**The North Carolina Conference United Methodist Youth  
Application for Funding Assistance**

**Steps to obtaining financial assistance are as follows:**

1. Complete a registration form for conference youth event online at [nccumc.org/youth/events/register](http://nccumc.org/youth/events/register).
2. Deposit for event must be paid online or by check, mailed to the above address, before funding assistance application can be reviewed. (ALL Checks are to be made payable to NCCUMC Youth Ministries and should have youth name and event in memo line.)
3. Contact your local United Methodist Church.
4. Review the application for funding assistance with the local pastor or local youth director to secure local church financial support.
5. Return Completed Application for funding assistance to  
NCCUMC Youth Ministries:  
700 Waterfield Ridge Place  
Garner, NC 27529
- 6. Please attach a letter from Youth Minister/Pastor discussing what the applicant has done to secure funds and why the applicant should receive the scholarship.**
7. The Application for funding assistance will be reviewed by the CCYM Chairperson, the Overall Dean of the registered event, and Ani Simpkins four weeks prior to the event date.
8. Parents will be notified of the availability of funds.
9. Parents/Guardians provide remaining balance of registration of the event.

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**Youth Name:** \_\_\_\_\_

Date youth received email confirmation of their event registration: \_\_\_\_\_

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

Youth Phone: \_\_\_\_\_ Youth Email: \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

**Home Church:** \_\_\_\_\_

District: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Pastor Name: \_\_\_\_\_

Event(s) you wish to attend: \_\_\_\_\_

- Global Vision- \$575
- ACS- \$285-\$300
- Breakaway- \$285-\$300
- Kaleidoscope- \$110

**The following questions MUST be completed to qualify.**

How active are you in local church activities? District and Conference events?

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What will you gain from participating in this event? What opportunities will you have to share this experience with others on the local and district level? Why do you want to go to this event?

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Write a statement of financial need or hardship including information that needs to be taken into consideration for assistance. Include steps you have already taken to secure funds for yourself (including talking to your UMM, UMW, or other groups in your congregation). (Use the back of application if necessary.)

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Pastor \_\_\_\_\_ (name) of \_\_\_\_\_ (church) has reviewed this funding assistance application and is aware of the circumstances described above. This youth is in need of assistance, and thus the church is providing our support of \$ \_\_\_\_\_. Please consider this youth for the matching financial assistance application funds. By signing below I am promising the above funds for the youth and will provide funds by check, mailed to the above address 2 weeks prior to the event.

**Pastor Signature:** \_\_\_\_\_

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

Parent \_\_\_\_\_ (*name*) will pay the deposit for the above mentioned events and requests matching financial assistance of up to \$150.00 from the NC Conference United Methodist Youth Ministries. Circumstances described above are accurate and true. I understand that I will be responsible for any remaining funds needed at the time of registration and I understand that if funds are not available to meet this need, I may request a refund of the deposit and withdraw my youth's registration.

**Parent Signature:** \_\_\_\_\_

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

-----For Office Use Only-----

Date received: \_\_\_\_\_ Remaining balance due at registration: \$

Total of funds needed for event(s): \$ \_\_\_\_\_

Funds provided by Local Church: \$ \_\_\_\_\_

Deposit paid: Yes \_\_\_ No \_\_\_

The following funds have been approved by the NC Conference United Methodist Youth Ministries, \$ \_\_\_\_\_.

**Approved by (Name)** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_