

Church Matching Scholarship Form

Return to Financial Aid at the address below, email it to financialaid@clarkssummitu.edu, or fax it to 570.585.9226.

Clarks Summit University will match a church gift or contribution to a student's account, up to \$1,000 for the school year (maximum \$500 matched per semester). Additional funds from the church can be sent but will not be matched. The student must meet Satisfactory Academic Progress to receive the scholarship.

Student Name _____ For School Year 20____ - 20____
Sponsoring Church _____
Street Address _____
City/State/Zip _____
Senior Pastor _____
Church Contact _____ Title _____
Email _____ Phone _____

Church Statement

We, the above named church, enter into an agreement with Clarks Summit University to provide for the student listed above a scholarship for the academic year. We, the church, have determined the scholarship amount (not the student or parent) and neither the student, relatives, or friends have contributed directly to this scholarship amount as an attempt to receive a tax-deductible gift for tuition dollars (see IRS Publication 526).

It is our intention to send in the following amounts by the dates listed. We understand that it is our responsibility to notify CSU and the student of any changes to these amounts and/or dates.

\$ _____ will be sent by _____ \$ _____ will be sent by _____
MM/DD/YY MM/DD/YY

Contact Signature _____ Date _____