

Ministry Matching Scholarship

Please complete in pen and return this form to Financial Aid.

Mail: Financial Aid, 538 Venard Rd. Clarks Summit, PA 18411
Email: financialaid@clarkssummitu.edu
Fax: 570.585.9226

Clarks Summit University will match a ministry's contribution to a student's account up to \$1,000 per school year (maximum \$500 per semester). The student must be a full time on-campus undergraduate student and must meet Satisfactory Academic Progress to receive the scholarship. Multiple ministries may contribute but the scholarship cannot be stacked.

Student Name _____ For School Year 20____ - 20____

Sponsoring Ministry _____

Street Address _____

City/State/Zip _____

Ministry Contact _____ Title _____

Email _____ Phone _____

Ministry Statement

We, the above named ministry, enter into an agreement with Clarks Summit University to provide for the student listed above a scholarship for the school year indicated. We have determined the scholarship amount and neither the student, relatives, nor friends have contributed directly to this scholarship amount as an attempt to receive a tax-deductible gift for tuition dollars (IRS Publication 526).

The following will be sent to CSU:

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

*Please include the student's name and/or student ID number with your check.

Contact Signature _____ Date _____