

**Whitworth University Financial Aid Office**  
300 West Hawthorne Road, Spokane, WA 99251 509.777.3215  
509.777.4601 (fax)      finaid@whitworth.edu

Students: Please submit this form to your church.  
**It is your responsibility to follow up to see that this form is mailed to  
Whitworth. Matching funds cannot be made until this form is received.**

Dear church administrator,

To assist churches in supporting students from their congregation, Whitworth offers the Church Matching Scholarship Program. This program applies when a church has designated funds from an established, ongoing scholarship fund to support undergraduate, full-time, matriculating day students attending college.

As a church, you may award a scholarship for each student from your congregation attending Whitworth. Whitworth will match the gift, dollar for dollar, up to \$500 for the academic year. This designated matching scholarship is not considered part of the church's annual fund support to Whitworth. A student receiving a "scholarship" in payment for work and/or an internship for a church is not eligible to receive matching funds.

Please complete the information on the reverse side of this form for **each** student who will be receiving church matching funds. You may duplicate the form if necessary. **This form must be completed by the church and returned to our office in order for funds to be matched by Whitworth.**

If possible, please send a check with this form. If that is not possible, indicate on the form when Whitworth may expect the scholarship funds from you.

Thank you for your support of our students.

If you have any questions, please call 509.777.3215 or 800.533.4668.

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**WHITWORTH UNIVERSITY CHURCH MATCHING SCHOLARSHIP FORM**

Student name: \_\_\_\_\_ Whitworth I.D. (if known) \_\_\_\_\_

Church name: \_\_\_\_\_

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

Contact person(s): \_\_\_\_\_

Title \_\_\_\_\_ Phone number (\_\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

**Amount awarded by church:**

\$ \_\_\_\_\_ /yr. Please indicate the total amount of the scholarship for the year. It will be credited to the student's account, one-half in fall and one-half in spring. The matching scholarship will also be split one-half for fall semester; one-half for spring semester.

\_\_\_\_\_ Funds already sent.

\_\_\_\_\_ Funds enclosed.

\_\_\_\_\_ Funds will be sent at later date: \_\_\_\_\_

(Please indicate date (s) on which funds will be sent.)

Additional comments:

I certify that these scholarship funds were not awarded based on an agreement that work or an internship would be performed by the student in order to receive them. I also certify that these scholarship awards are from a designated scholarship fund available to all students upon application or selection by committee.

\_\_\_\_\_  
Signature of church administrator

\_\_\_\_\_  
Date

Please return form to:  
Whitworth University  
Financial Aid Office  
300 West Hawthorne Road  
Spokane, WA 99251

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