



# REQUEST FOR SCHOLARSHIP

*\*\*All information will be kept strictly confidential\*\**

Counselor/Group name: \_\_\_\_\_

**THE BARNABAS CENTER**  
A COUNSELING, TRAINING & TEACHING MINISTRY

Client #1 → 1. \_\_\_\_\_ Last year's Total Income [from line 22 Fed. Tax return]  
2. \_\_\_\_\_ Current year's projected income [Include pension, retirement, child support, unemployment, severance]  
3. \_\_\_\_\_ Other avenues of revenue/income [gifts from parents, inheritance, savings, alimony etc.]

Client #2 → 4. \_\_\_\_\_ Last year's Total Income [from line 22 Fed. Tax return]  
(or spouse)  
5. \_\_\_\_\_ Current year's projected income [Include pension, retirement, child support, unemployment, severance]  
6. \_\_\_\_\_ Other avenues of revenue/income [gifts from parents, inheritance, savings, alimony etc.]

Total Household income:  
\_\_\_\_\_ Combined Total of last year's Total Income [lines 1+4]  
\_\_\_\_\_ Current Year Projected Total [lines 2+3+5+6]

Total # of Dependents in household: \_\_\_\_\_ Briefly describe any extenuating circumstances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List your options for other financial assistance for your counseling/group work:

\_\_\_\_\_ Church Benevolence Fund \_\_\_\_\_ Medical Insurance Benefits \_\_\_\_\_ Other (i.e. family etc.)

What has the response been from your options above? \_\_\_\_\_  
\_\_\_\_\_

I verify that this information is true to the best of my knowledge. I will let my counselor know if my circumstances or status in salary changes.

Client # 1: \_\_\_\_\_  
*print name* *signature*

Client # 2: \_\_\_\_\_  
*print name* *signature*

Email address \_\_\_\_\_ Preferred phone #: \_\_\_\_\_ [hm / wk / cell]

## REPLY TO SCHOLARSHIP REQUEST

\_\_\_\_\_ Your counseling rate will be \$ \_\_\_\_\_ per 50 minute session representing a discount of \$ \_\_\_\_\_.  
Effective \_\_\_\_\_ Expires in 12 months on \_\_\_\_\_.

\_\_\_\_\_ Your Group/Seminar fee for \_\_\_\_\_ will be \$ \_\_\_\_\_ representing a discount of \$ \_\_\_\_\_.  
Effective \_\_\_\_\_ Expires on \_\_\_\_\_.

\_\_\_\_\_ We do not have scholarship funding for you at this time. If your financial circumstances change, you may reapply.

Counselor: \_\_\_\_\_  
*signature* *date*

For questions, please contact Cinda Hutchinson at 704-365-4545 ext. 317 or [chutchinson@thebarnabascenter.org](mailto:chutchinson@thebarnabascenter.org).

**Please allow two business days for processing.**