

Weirton Christian Center

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TRANSPORTATION SCHOLARSHIP APPLICATION

Child's Name _____

Address _____

Mother _____ Phone _____

Address _____ Employed _____

Net Monthly Income _____

Father _____ Phone _____

Address _____ Employed _____

Net Monthly Income _____

Do you have any children on Free or Reduced Lunch? _____ Yes _____ No

Personal References:

Name _____ Address _____ Phone _____

Signature of Parent _____

Date _____

I certify that the above information is correct.