

**Mount Zion Christian Academy**  
*Scholarship Committee*

Dear Parent/ Student,

Thank you for your interest in applying for an MZCA Scholarship for the upcoming school year. The following documentation must accompany your completed application:

- The previous year's tax transcript OR tax return listing dependents
- Three (3) letters of recommendation, one from each of the following
  - school administrator from the last school attended
  - teacher from the last school attended
  - Pastor, other clergy member, community leader, etc.
- Proof of income/financial support for parents/guardians claiming unemployment status (if applicable)
- Proof of disability and disability income for parents/guardians claiming disability status (if applicable)

Incomplete applications will be deemed void and will not be considered for any scholarship opportunity.

Both the parent(s) and student must attend an interview with the scholarship committee. You will be contacted and given the date and time for your interview.

Yours in Christ,

***MZCA Scholarship Committee***



**Parent / Guardian Information**

Father's Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Mother's Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Address: \_\_\_\_\_  
Street Name/No. City, State, Zip

Contact Numbers:  
Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_ Other ( ) \_\_\_\_\_

Mother's Email Address \_\_\_\_\_

Father's Email Address \_\_\_\_\_

Father's Employer: \_\_\_\_\_ Mother's Employer: \_\_\_\_\_

Are you a member of Mount Zion Christian Church? \_\_\_ Yes \_\_\_ No

Do you attend services regularly? \_\_\_ Yes \_\_\_ No

If you are not a member of Mount Zion Christian Church,  
what church do you attend?  
\_\_\_\_\_

**Household Information**

List names of dependent children. (Include the child that is applying for the scholarship)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How many of the above dependents now attend MZCA? \_\_\_\_\_

Parent / Guardian Comments:

---

---

---

---

---

---

---

---

---

---

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_