

Unitarian Universalist Society of Schenectady
Religious Education Aninger Fund Scholarship for Youth Leadership Development
Individual Application

Applicant

Name: _____ Age: _____
 Address: _____
 City, State, Zipcode: _____

 Phone: _____
 Email: _____

Parent/Guardian

Name: _____
 Address: _____
 City, State, Zipcode: _____

 Phone: _____
 Email: _____

You may apply at any time, but applications are reviewed twice a year at the first Religious Education Team meeting in both November and May. Applications should be submitted by **November 1st** for review at the November RET meeting or by **May 1st** for review at the May meeting. Applications must be submitted before the date of the program. Please send applications to the Director of Lifespan Religious Education, 1221 Wendell Ave, Schenectady NY 12308 or leave them in the Religious Education Team mailbox at the same location.

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| What program are you planning to attend? What is the date of the program? | What is the total cost of the program you will attend? Please outline the expenses. |
| How much money are you applying for from the Aninger Fund? | Would you be able to attend this program without Aninger funding? |
| In what ways do you expect this experience to benefit your Unitarian Universalist faith? Please attach a separate piece of paper to answer this question, if needed. | |

If selected to receive an Aninger Scholarship, upon your return from your leadership experience, you will be expected to share, with the UUSS community, the ways in which you have grown from this experience. This can be done through a Circuit article, a presentation to a Coffee, Crullers and Conversations session and/or a presentation to the UUSS community during worship services. Your signature below indicates your agreement to these terms. We recommend you complete this project within two weeks of your experience, but it must be completed within four months. Failure to complete this requirement within four months will jeopardize future applications. A group application should be used for group activities and/or youth group trips.

Your Signature: _____ Date: _____

For office use:

Date received: _____ Date reviewed: _____ Amount Awarded: _____