



## Rosie-Jean Scholarship Application

For First-Time Adult Attendees - Church Music Workshop

Applicant's Name: \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Church Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Home or Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Name of recommending Fellowship Member: \_\_\_\_\_

*A Letter of Recommendation from a Fellowship Member must accompany this application.*

#1. How are you involved in your church's music ministry? \_\_\_\_\_

#2. If you are a part-time church music director, would receiving a full scholarship (registration plus R&B) make the difference between you attending this workshop or not? If yes, why? \_\_\_\_\_

#3. What are some of the needs in your life and service to the church that you think the Workshop experience might help to address? \_\_\_\_\_

I wish to apply for the following First-Time Adult Attendee Scholarship:

- Registration Fee Scholarship (\$225). I understand that I will be responsible for paying my own Workshop Room & Board.
- Full Workshop Scholarship (includes Registration Fee and Double Room & Board - \$536). (Question #3 above must be answered to apply for the Full Workshop Scholarship.) I understand that I will be responsible for paying any balance due if I should request single room & board.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Submit signed application and letter of recommendation by published deadline.  
(For current deadline, see ["Scholarships" page](#) on the Florida Fellowship Website.)

E-mail to Workshop Registrar at [fl.fellowship.workshop@gmail.com](mailto:fl.fellowship.workshop@gmail.com).

OR mail to Kristin Dow, Registrar, 157 Parkside Circle, Crawfordville, FL 32327