

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 F | | |
| #1. How are you involved in your church's m | nusic ministry? | |
| | | |
| #2. What are some of the needs in your life ar help to address? | • | |
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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.

OR mail to Cindy Huffman, Registrar, 1261 Royal Oak Dr., Dunedin, FL 34698