

A New Beginning workshop-Scholarship Application

We understand that many couples who attend the *A New Beginning* workshop are experiencing financial difficulties. We are deeply committed to finding ways to provide this resource for those who need it most. All information provided in this application is confidential and will only be used to help us assist you financially. Specific circumstances should be discussed with your consultant and included in this application.

*Since both spouses must attend and participate in the workshop, financial assistance will only be offered if both spouses ready to commit and register.

Please note: Scholarship assistance is limited to donated funds available for this purpose. This application is valid for fourteen (14) days after it is submitted. If you have not registered for a workshop within **fourteen (14) days**, your scholarship assistance may be released for another couple to use.

Husband's Name: _____ Daytime Ph # _____

Wife's name: _____ Daytime Ph # _____

City: _____ State: _____

1) What is your total household income range per year: (choose one) _____

Under \$40,000 \$40,000-\$60,000 \$60,000-\$80,000 \$80,000-100,000 Over \$100,000

2) Number of people in your household: (including yourself) _____

3) Are there any special circumstances in your family that are causing financial difficulties?

4) How much are you able to contribute as the down payment towards the cost of the workshop?

PLEASE INCLUDE AN EXACT AMOUNT so that your scholarship application can be processed.

5) After attending the workshop, how much would you be able to pay on a monthly payment plan?

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6) Have you asked family members or close friends to help you pay for the workshop?

7) Are you in the military or a veteran? Are you a first responder? Are you in full-time ministry?

8) How did you learn about the A New Beginning Workshop?

9) Workshop location and date that you would like to attend:

10) Are you and your spouse willing to attend the workshop at this time? _____

11) How do you think the A New Beginning Workshop will help your marriage?

By signing below we acknowledge that the information provided above is true to the best of our knowledge.

Signed: _____

Date: _____

Signed: _____

Date: _____

Return this application via fax (615-627-0761) or email (mmorris@marriagedynamics.com).