



## Church Matching Scholarship Appeals Form

Use this form to make an appeal after the semester deadline has passed. Please explain the student(s) need for an appeal in the *Reason for Appeal* section. You will be informed by email of the approval or denial of your request.

For faster processing, submit form and payment at [www.indwes.edu/churchmatching](http://www.indwes.edu/churchmatching).

Church Name: \_\_\_\_\_ ID# \_\_\_\_\_

Church Address: \_\_\_\_\_

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

Church Phone: (    ) \_\_\_\_\_ Website: \_\_\_\_\_

Church Email: \_\_\_\_\_

Scholarship Contact Person: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Scholarship Contact Person Email: \_\_\_\_\_

Senior Pastor: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

(Signature required by Pastor, Treasurer or Financial Rep)

Student Name (First, MI, Last)	Student ID #	Semester 1	Semester 2
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Semester Totals			

### Reason for Appeal

Please explain below the reason for missing the deadline and the students need for the appeal.

To ensure proper credit, all applications and payment should be sent to the address or email below:

**Advancement - Church Matching Scholarship**  
Indiana Wesleyan University  
4201 S. Washington St.

**Phone:** 765-677-4971  
**Email:** [churchrel@indwes.edu](mailto:churchrel@indwes.edu)

Marion, IN 46953-4974