

Pittsburgh Presbytery
Mission Travel
Application for Financial Aid

Group/Individual Name of Applicant _____

Names and phone numbers of group members:

Address _____ Phone _____

Name or description of trip _____

Destination _____

Contact person for trip _____ Email _____

Anticipated dates of travel _____

Church affiliation _____

Pastor _____ Clerk of Session _____

Church address and phone _____

This trip has been approved by the Session of _____ church.

Signature (Clerk of Session) _____

Total cost of trip _____ Amount financed by applicant _____

Amount financed by church _____ Assistance requested (circle) \$250 individual / \$500 group

Names and phone numbers of two people who can speak to the financial need of the applicant:

Deadline: Completed forms must be received at least two months prior to event.

Mail to: Rev. Ayana Teter
Pittsburgh Presbytery
901 Allegheny Avenue
Pittsburgh, PA 15233

Please note: Scholarship recipients should be available to interpret their mission trip experience.