



CISV USA
Pittsburgh

Building global friendship

CISV Pittsburgh Scholarship Application

1. Child's Full Name: _____ Today's Date: _____
2. Parent Name: _____ Parent Name: _____
3. Program Name: _____ Program Location: _____
4. Cost of the Program: _____ Estimated Travel Costs: _____
5. What amount can you reasonably be able to contribute? _____

6. For what amount of scholarship are you applying? _____

Scholarships may be requested to cover up to half of the total program cost, including travel. To help us meet the needs of as many families as possible, we ask families applying for scholarships to request what they need and pay what they are able.

7. CISV is a family organization with many programs and activities throughout the year. How have/will you and your family volunteer time and effort working with our chapter?

8. Tell us your thoughts for applying for this scholarship, including any special circumstances.

Parent's signature _____ Parent's signature _____

The information provided here is strictly confidential.

This application may be supplemented by a personal interview.

Please email this form to: CISV Scholarship Chair c/o pittsburgh@cisvusa.org