

Cross-Cultural Ministry Practicum Travel Grant Application Form

Please Print:

Full Name: _____ Date: _____

Address: (The travel grant check will be mailed to this location.)

Street: _____ City: _____ State: ____ Zipcode: _____

Phone: _____ E-mail: _____

Samford University ID Number: _____

I am applying for a:

- Partial travel grant for a ministry practicum in North America for 50 percent of the total cost of the trip up to \$350.

- Partial travel grant for a ministry practicum in Africa, Asia, South America, Central America, the Caribbean, Australia, or Europe. Travel grants will vary depending on location, cost of trip, and number of grants allotted. (This travel grant is not listed as a scholarship through your Samford account, therefore it is taxable income.)

Where will you be completing your CCMP? _____

With what ministry partner, organization or agency? _____

What are your dates of travel for this CCMP? _____

Student Signature: _____

For Global Center Office Use Only:

Amount Awarded: \$ _____

Student Notified (date): _____

Global Center Signature: _____	Date: _____
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