



CHURCH MATCH SCHOLARSHIP

Please use our contribution to assist _____ (*insert student's name*)

Semester: Fall or Spring (*circle one*)

Name of Church _____

Address _____

City _____ State _____ Zip Code _____

Amount of contribution: \$500 or _____ (*circle or insert another amount*)

Name of Pastor _____ (*please print*)

Pastor Signature _____

Please make check payable to Mid-America Christian University.



MID-AMERICA
CHRISTIAN UNIVERSITY

3500 SW 119th Street, Oklahoma City, OK