WOMAN'S MISSIONARY UNION OF VIRGINIA

2828 Emerywood Parkway, Richmond, VA 23294
Telephone: 804-915-5000 or -800-255-2428 Fax: 804-672-8008

Email: wmuv@wmuv.org Website: www.wmuv.org

CROSSROADS CONNECTION SCHOLARSHIP

Qualifications and Guidelines

The Woman's Missionary Union of Virginia (WMUV) provides partial scholarships to assist children or youth through the summer camping program at CrossRoads who are not involved in a local church and who meet financial eligibility.

The purpose of this scholarship is to increase the number of children who can benefit from the camping experience at CrossRoads Camp and Conference Center (CrossRoads). Children are eligible for the CrossRoads Connection Scholarship if they:

- a) need financial assistance,
- b) are not currently eligible for other established camp scholarships, and
- c) lack affiliation in a church

This scholarship is designed to foster a relationship between a child, along with the child's family, and a local church, giving preference to a Baptist General Association of Virginia (BGAV) church. The scholarship will provide at least one half (1/2) of the camp fee for the child and the church will mentor/nurture the child prior to and following the camping experience.

Applicants are eligible for one scholarship per camping year and must meet the following requirements:

- 1. Any local church or organization within the church (i.e., Sunday School class, WMU group, etc.) or association (collectively the "Sponsor") should identify children that meet the requirements to be a summer camper at CrossRoads. Preference will be given to a BGAV church or association.
- 2. Children identified should be deemed in financial need by the Sponsor recommending the child based on the current financial situation of her/his parents/guardian. The Sponsor should determine that the parent/guardian cannot pay the current camping fees for summer camp. A written statement from the Sponsor must be attached to the application explaining the current situation and the need.
- 3. The Sponsor should also submit a written statement or plan for nurturing and mentoring the child and/or family into the life of their church.

- 4. The Sponsor will commit to fund at least one half (1/2) of the cost of the regular camping fee.
- 5. Scholarship approval is subject to available space at CrossRoads and available funding at WMUV.
- 6. Applications will be reviewed and evaluated by two of the following: the Executive Director/Treasurer of WMUV, Director of CrossRoads, or the Summer Camp Director. Scholarship recipients will be sent a letter of confirmation, health form, and camp brochure upon approval.
- 7. The Sponsor will be responsible to arrange transport for the child to and from camp on the scheduled days.
- 8. After their camp experience, all children sponsored by this scholarship are required to write a one page summary of "What I Learned or Experienced at Camp." The Sponsor may assist the camper with this task. The summary should be mailed to: Scholarships, WMUV, 2828 Emerywood Parkway, Richmond, VA 23294, or emailed to <a href="https://www.urg.ncbi.nlm
- 9. Within three months of the child's return from camp, the Sponsor is requested to submit a follow-up summary of their resulting efforts to mentor/nurture their identified child/family. Consideration for the Sponsor to access the CrossRoads Connection Scholarship in the future is contingent on submission of this summary. The summary should be mailed to: Scholarships, WMUV, 2828 Emerywood Parkway, Richmond, VA 23294, or emailed to wmuv@wmuv.org
- 10. All applications must be submitted no later than May 1.
- 11. Applicants shall be endorsed by the Board of Trustees of WMUV.

WOMAN'S MISSIONARY UNION OF VIRGINIA

2828 Emerywood Parkway, Richmond, VA 23294
Telephone: 804-915-5000 or -800-255-2428 Fax: 804-672-8008
Email: wmuv@wmuv.org Website: www.wmuv.org

CROSSROADS CONNECTION APPLICATION SUMMER CAMP

| Camper's Name Parent/Guardia Address | n's Name | (Year) | | |
|--------------------------------------|---------------|------------------------------|---------|-------|
| Camper's Name Parent/Guardia Address | e n's Name | | | |
| Parent/Guardia Address | n's Name | | | |
| Parent/Guardia Address | n's Name | | | |
| Address | | | | |
| | | | | |
| | (City) | | (State) | (7:) |
| Telephone Num | • | | (State) | (Zip) |
| • | | | | |
| Date of Birth: | | School Grade Next September: | : | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| hurch: _ | | | | |
| ddress: _ | | | | |
| | (City) | (State) | | (Zip) |
| | | | | |

| Sponsor | r Information | | | | | | |
|-------------------------|--|---|-----------|--|--|--|--|
| Address | <u> </u> | Telephone | | | | | |
| | (City) | (State) | — (Zip | | | | |
| | (Position) | | | | | | |
| NOTE: T | The Sponsor is to attach the following documents to this Application: | | | | | | |
| 1. / | A written statement explaining the current situation and the need of the | e camper. | | | | | |
| 2. / | A written statement or plan for nurturing and mentoring the child and/ | or family into the life of their church | | | | | |
| Learned | ir camp experience, all children sponsored by this scholarship are requor or Experienced at Camp." The Sponsor may assist the camper with hips, WMUV, 2828 Emerywood Parkway, Richmond, VA 23294, or en | this task. The summary should be mailed | | | | | |
| efforts to Scholarsi | aree months of the child's return from camp, the Sponsor is requested on mentor/nurture their identified child/family. Consideration for the Sponsor in the future is contingent on submission of this summary. The succession of the Summary of the S | onsor to access the CrossRoads Connections on the contraction of the contract | on | | | | |
| We, the | parents/guardian and Sponsor, have read the Guidelines for the | ne CrossRoads Connection Scholarsh | p and | | | | |
| agree to | comply with the requirements as stated. | | | | | | |
| Signed _ | | | | | | | |
| | (Parents/Guardian) | | | | | | |
| Signed _ | | | | | | | |
| | (Sponsor) | | | | | | |
| Applicati | ions should be mailed to: | | | | | | |
| | CrossRoads Connection Scholarship | | | | | | |
| \ | WMU of Virginia | | | | | | |
| i | 2828 Emerywood Parkway | | | | | | |

Richmond, VA 23294

WOMAN'S MISSIONARY UNION OF VIRGINIA

2828 Emerywood Parkway, Richmond, VA 23294
Telephone: 804-915-5000 or -800-255-2428 Fax: 804-672-8008

Email: wmuv@wmuv.org Website: www.wmuv.org

CROSSROADS CONNECTION SPONSOR RECOMMENDATION

| | (Year) | | |
|-------------|--------|--------|--|
| | | Date _ | |
| per's Name: | | | |
| | | | |
| sor: | | | |
| | | | |
| h: | | | |
| | | | |
| or: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Application and recommendation from the Sponsor should be mailed to:

CrossRoads Connection Scholarships, WMU of Virginia, 2828 Emerywood Parkway, Richmond, VA 23294

WOMAN'S MISSIONARY UNION OF VIRGINIA 2828 Emerywood Parkway Richmond, VA 23294

e-mail: wmuv@wmuv.org

CROSSROADS CONNECTION SCHOLARSHIP APPLICATION - PART 2 EXPERIENCE AT CAMP

| | (Year) | | |
|------------------------------------|--------|--------|---|
| To be completed <u>after</u> camp: | | | |
| | | Date _ | |
| Camper's Name: | | | _ |
| Church: | | | - |
| Pastor: | | | _ |
| Date attended camp: | | | _ |
| SHARE YOUR CAMPING EXPERIENCE: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

(Please continue on the back of this form, if needed.)

Please mail the written explanation to:

CrossRoads Connection Scholarship WMU of Virginia 2828 Emerywood Parkway Richmond, VA 23294