Please Return To: **Texas Christian University**Office of Scholarships and Student Financial Aid
TCU Box 297012
Fort Worth, TX 76129
(817) 257-7858
Fax (817) 257-7462

CHRISTIAN YOUTH FELLOWSHIP APPLICATION

APPLICATION DUE DATE:	MAY 1			DATE
regional officers of the Christian Y tuition for up to 18 hours per semes for financial aid satisfactory acade renewal. You must complete the F	Youth Fellowsh ster and is rene emic progress. ree Application	nip. The wable fo Additi n for Feo	ese awar or eight s onally, leral Stu	hrist), TCU is able to offer tuition assistance to ds will be in an amount not to exceed one-half semesters providing the student meets the criteria a TCU cumulative GPA of 2.5 is required for ident Aid (FAFSA) to be considered for all other d entering transfer students are also required to
Name				ΓCU Student ID Number
Please indicate the Academic Year f	or which you a	are apply	ing (exa	mple: 2018-2019)
Do you intend to file a FAFSA?		Yes		No
Will you be filing the CSS Profile?		Yes		No
Anticipated Hours of Enrollment:		Fall		Spring
Region in which you held office: _				
Office you held and dates of office:				
Christian Church in which you are a	member:		·	
Minister of the church in which you	are a member:			
Address of church in which you are	a member:			
* Students receiving the CYF mu	ıst be full-tim	e studei	nts.	