

# STUDENT MENTORSHIP GRANT APPLICATION

People to People Ministries, a non-profit humanitarian organization supplements the needs of disadvantaged children in local schools, state-sponsored/kinship care (living with a relative, friend or neighbor), or in a transitional living situation. Through our efforts we desire to subsidize the needs of children to help secure their stability.

Each quarter the needs of students involved in this program will be identified to determine the degree of assistance required. For a review of the online student needs list, visit [peopletopeopleministries.com](http://peopletopeopleministries.com)

Date: \_\_\_\_\_

**Referred by** \_\_\_Teacher \_\_\_ Counselor \_\_\_ Social Worker \_\_\_ Other \_\_\_\_\_

Full Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Email \_\_\_\_\_

Child's Full Name (print) \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ Gender \_\_\_ Male \_\_\_ Female

## **Ethnic background**

American Native American  Asian  African  Hispanic/Latino  
 Pacific Islander  White  Other \_\_\_\_\_

**Guardian/Parent** - Relationship to child \_\_\_\_\_

As parent/guardian of the above named child, I am giving consent for People to People Ministries to contact me regarding his/her participation in this mentorship program. My signature below confirms my permission.

Full Name (Print) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_ County \_\_\_\_\_

Signature \_\_\_\_\_

For more information about this program email Carl Parker, PhD at [peopleministries@gmail.com](mailto:peopleministries@gmail.com)



