



ECHO International Scholarship Application

Dumb Ox Ministries is a 501 © 3 non-profit ministry that works with teens, young adults, and families; cultivating their authentic masculinity and femininity through the Theology of the Body, helping them to prepare for, discern, and pursue their unique vocations to love.

We incarnate this mission through ECHO to make it more than a mission, but a real, tangible, lived experience. We are so happy to have you join us.

Please Note: *This scholarship is distributed to international participants who are in need of financial aid. Scholarships for this event range from \$50.00 to \$250.00 (USD), depending on the availability of funds.*

1. Full Name: _____ Age: _____

2. ECHO Session (*Circle or highlight one*): **NEW ORLEANS** **CENLA**

3. Scholarship Amount you are requesting: _____

4. Please briefly describe the reason for your financial need.

5. Are you currently employed? (Select One): Yes No

6. Are you currently a student? (Select One): Yes No

If you circled yes, full time or part time? _____

Name of High School or College/University: _____

GPA: _____

If you are attending a college or university, what is your major or area of concentration?

7. Why are you a good candidate for the ECHO International Scholarship?

8. What fundraising have you done or intend to do in order to raise additional funds to cover the ECHO registration costs, travel, etc?

How much have you raised or do you intend to raise? _____

Not including the funds that you have raised, how much are you personally able to contribute toward your ECHO registration and travel?

For additional assistance in fundraising, please contact our Director of Development, Katie Ibarra, at katie@dumboxministries.com or (504) 756-3015.

Please email or mail this application to the Dumb Ox Ministries Office:

Email Address: echocamp@dumboxministries.com
Mailing Address: 1000 Howard Ave, Ninth Floor, New Orleans, LA 70113
Phone: (504) 304-1280

Note: If awarded this scholarship, you will be asked to write a brief testimonial/summary of your experience to share with us within two weeks of ECHO to share the Good News of what God has done.

OFFICE USE ONLY:

Date Received: _____ **Amount Awarded:** _____