

# The Hearts Center

## Pilgrimage Scholarship Request Form

Argentina/Uruguay Conference, Pilgrimage and International Congress

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Total Scholarship Amount Requested \_\_\_\_\_

How long have you been active within The Hearts Center? \_\_\_\_\_

Approximately how many pilgrimages/events have you attended to date? \_\_\_\_\_

Have you received previous scholarship(s) of any kind from The Hearts Center? [ ] Yes [ ] No.  
If so, when/what amount?

\_\_\_\_\_  
\_\_\_\_\_

How much are you able to pay toward this pilgrimage/event and when? \_\_\_\_\_

\_\_\_\_\_

Why do you desire to attend this pilgrimage/event and why do you believe should you receive a scholarship?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If approved for a scholarship, how do you plan to “pay forward” this gift (meaning doing a favor for others rather than paying the favor back) to The Hearts Center or to others within our movement?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please complete this form, save it as a Word document or a Rich Text File (rtf) by adding your last name to the end of the file name and email it to our team at [Argentina@heartscenter.org](mailto:Argentina@heartscenter.org)*