



Eichhorn Scholarship/Payment Plan Request

Thank you for requesting financial support to participate in a program at Dominican Center Marywood. Please apply before registering for a program. Complete the following and email it a minimum of 2 weeks prior to the beginning of the program to programs@dominicancenter.com. You can request a payment plan AND a scholarship, if needed. Our scholarships are limited to \$50-\$200 per request. If you need more financial support, please call Mindy Hills, the Director of Dominican Center at 616-514-3360.

STEP 1: APPLICANT INFORMATION

Name of Applicant		Date	
Title of Program		Program Fee	
Address of Applicant		Email Address	
City	State	Zip Code	Phone Number

STEP 2: REASON FOR REQUEST

Please share below why you are interested in attending the program AND why you are requesting financial assistance.

STEP 3: PAYMENT PLAN REQUEST

Payment Plan: If you can manage the full cost with a monthly payment plan, please indicate how much you will pay per month. The entire fee will need to be paid by the end of the program for which you are registering.

Monthly Payment: \$ _____ Starting Month: _____

STEP 4: SCHOLARSHIP REQUEST

Scholarship: If you are requesting a scholarship, please indicate how much you are requesting: \$ _____

Matching Grant: If there is a church or organization that you are affiliated with that can contribute towards the registration fee, please complete and submit the matching grant form.

Please return this form to Mindy Hills Director of Dominican Center at Marywood, mhills@dominicancenter.com

For Dominican Center Marywood use only:	
Dominican Center Marywood agrees to the payment plan terms as noted above and awards an Eichhorn Scholarship for \$ _____	Director, Dominican Center Marywood Signature: _____ Date: _____