



Joint Conference of Restoration Branches

World Education Fund-School Information

Student Name: _____

School Name: _____

School Information (Please print)

Address: _____

State/Prov/District: _____ Country: _____

Phone: _____ Email: _____

Website: _____

School Mission Statement: _____

Type of school:

Government Private/Religious Joint

Tuition Schedule/Payment Schedule (please attach)

Yearly Term Quarterly

Grading scale (please attach)

Schools attended by World Education Fund scholarship recipients are required to submit semester grades for students along with an achievement/progress report including all recommendations to assure success of student progress to the World Education Fund

Committee. Agree? Yes No

Contact Personnel (Please print)

Principal Name: _____

Phone: _____ Email: _____

Financial Officer Name: _____

Phone: _____ Email: _____

Please Email completed forms or photo to application@JCRBWorldEducation.com