

Dear TOPS Family,

Congratulations! Your child has been award Scholarship. With this award, comes responsibilities upon signing the agreement	onsibilities on the part of the student	and family. You commit to these
NAME	QUARTER (ci	rcle nine weeks) 1 st 2 nd 3 rd 4 th
CHURCH	Please provide a contact from the	church (secretary/pastor):
Name	and number/email	
Church Service Attendance WEEKL	Y MONTHLY OCCASION	NALLY NEVER
Church 'Activities' Attendance	YESNO	
CHURCH Donations of time, talent, and tr	reasures:	
List activity (such as festivals, prayer group	os, etc.)	
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
SCHOOL Donations of time, talent, and tr	easures:	
List activity (such as canned food drive, tic	ket sales, marathon, etc.)	
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
	TIME/TALENT (in hours)	TREASUREyes no
My child has been a part of these activities	s whenever applicable yes	no
My child has maintained an A/B average the	his quarter yes no	
My child has not received any discipline re	eferrals. (behavior, dress code, etc.)	correct they have
My child's attendance is good. (minimal a	bsences/days tardy) correct	no