

**Peter Goudeaux, Jr. Assistance Program**  
**For First Corinthian Members who are continuing their education**  
**Mission Statement**

*To provide support in times of financial hardship to members and to promote personal growth*

Values

Compassion

Guidance

Confidentiality

Professionalism

Name \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_

College name / Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_

Year in college \_\_\_\_\_ Grade point average \_\_\_\_\_

Church Affiliation \_\_\_\_\_ Number of Years \_\_\_\_\_

**On a separate sheets of paper submit the following:**

- Grade transcripts
- Letter of enrollment verification from registrar
- Letter of financial situation: A typewritten statement describing your need for financial support.

**Applications maybe submitted to any member:**

Carr, Linda

Thompson, Linda

Jeffries, Lynne

