

**PROPAPA MISSIONS AMERICA  
SCHOLARSHIP PROGRAM**

*"EDUCATION IS THE KEY TO THE FUTURE"*

**I would like to be a sponsor for the upcoming school year!**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Please make checks payable to:** ProPapa Missions America

**Please mail checks to:** Ms. Shirley Sholtis Glova  
P.O. Box 71  
St. Benedict, PA 15773  
Attn: Scholarship Program

**Please make note of what type of sponsorship you wish your gift to be applied toward:**

- Grade School; \$50 per student per school year.
  - Middle school [Jr. High]; \$150 per student per school year.
  - Other; please explain your wishes \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Please contact me if I can answer any questions you may have about our programs at ProPapa to allow the very poor to receive an education: [ssholtis@usa.net](mailto:ssholtis@usa.net)**

**Thanks you in advance for your generosity!**

*Shirley*

PPMA Form-26 Scholarship Program Support. Approved October, 2007. Improvements to [scribe@propapa.org](mailto:scribe@propapa.org)