

ST. JOHN'S LUTHERAN CHURCH FOUNDATION
SCHOLARSHIP APPLICATION for ELCA COLLEGES

To the applicant: Please complete this application and return it to St. John's Church office **BEFORE NOON ON APRIL 1, 2017**. If more space is needed, attach additional sheets. Please include transcripts: high school seniors attach high school transcript and college students attach college transcript (does not need official seal, may be a copy). Recipients will be notified as soon as possible. At the present time, only those attending ELCA-affiliated colleges will be considered. Scholarship funds will be sent directly to the college in your name. Most colleges offer matching funds for scholarships received from a home congregation; if you know that your college does, please make a note of it on your application.

PLEASE NOTE THAT AFTER THE CHURCH'S ANNUAL MEETING IN JANUARY, YOU WILL RECEIVE A LETTER CONFIRMING THE AMOUNT OF YOUR AWARD. AT THAT TIME, PLEASE CONTACT YOUR SCHOOL'S FINANCIAL AID OFFICE AS TO ANY DEADLINE DATES FOR ANY FORMS OR INFORMATION NEEDED TO RECEIVE MATCHING FUNDS, IF AVAILABLE. PLEASE OBTAIN THE FORMS FROM YOUR SCHOOL AND DROP THEM OFF AT THE CHURCH'S OFFICE, "ATTENTION FOUNDATION" WITH INSTRUCTIONS AS TO WHAT IS NEEDED AND WHEN NEEDED. ANY QUESTIONS OR UPDATE REQUESTS CAN BE SENT BY E-MAIL TO: foundation@stjohnskasson.org.

APPLICANT DATA:

Name _____

Social Security Number _____ Birthday _____

Address (Street) _____

(City) _____ (ST) _____ (Zip) _____

Telephone _____ Email _____

Parent/guardian name _____

Address _____

Church of membership _____

Year joined _____

IN SUBMITTING THIS APPLICATION, I CERTIFY THAT THE INFORMATION PROVIDED IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. FALSIFICATION OF INFORMATION MAY RESULT IN TERMINATION OF ANY SCHOLARSHIP GRANTED.

SIGNATURE _____ DATE _____

SCHOOL DATA:

School currently attending _____
Address _____
Phone _____

Projected graduation date _____ Attach transcript

ELCA College attending next year _____
Address _____
Phone _____

Year in college (circle) 1 2 3 4
Student will live On campus _____ Off campus _____ Commute _____

Student will be enrolled: Half time or less _____
Half time or more _____
Full time _____

Projected Major _____
Minor _____

IF YOU HAVE ALREADY RECEIVED AN AWARD AND YOU ARE CONTINUING YOUR EDUCATION YOU DO NOT NEED TO FILL THE BELOW SECTIONS.

Please write a statement concerning your future plans and goals (may attach additional information or complete statement, if desired).

PERSONAL DATA:

List all church-related activities for the past five years (may attach additional information or complete list, if desired).

Year	Activity
_____	_____
_____	_____
_____	_____

List all school related activities and awards for the past four years (may attach additional information or complete list, if desired).

Year	Activity
_____	_____
_____	_____
_____	_____

List all work experience of the past three years (may attach additional information or complete list, if desired).

Year	Job and duties
_____	_____
_____	_____
_____	_____