



# Living Faith Lutheran Church

## Scholarship Grant Application

(Please return this form to the church office on or before May 31st.)

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

Address, City, State, Zip \_\_\_\_\_ Age: \_\_\_\_\_

Contact Phone # \_\_\_\_\_ Email Address: \_\_\_\_\_

Year in College as of next September \_\_\_\_\_ # of credits you will be taking? \_\_\_\_\_

Parent or Guardian \_\_\_\_\_ Telephone \_\_\_\_\_

Address of Parent or Guardian \_\_\_\_\_

What school do you plan to attend? \_\_\_\_\_

What major course of study to you plan to follow? \_\_\_\_\_

What degree to you expect to earn? \_\_\_\_\_

Anticipated year of graduation \_\_\_\_\_

If more than 4 years, please explain\* \_\_\_\_\_

For what scholarships have you applied, or are being considered? \_\_\_\_\_

When did you become a member of Living Faith Lutheran Church? \_\_\_\_\_

What is your Grade Point Average? \_\_\_\_\_

What is the occupation of your father? \_\_\_\_\_

What is the occupation of your mother? \_\_\_\_\_

How many brothers and sisters do you have? \_\_\_\_\_ Brothers, ages: \_\_\_\_\_

\_\_\_\_\_ Sisters, ages: \_\_\_\_\_

Would you be able to attend school without financial assistance from outside your own family? \_\_\_\_\_

Please explain\* \_\_\_\_\_

(Please complete second page.)

List your church activities\* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List your other outside activities\* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your experiences over the past few years which you have found most interesting, stimulating or valuable. \*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any kind of part-time job during the school year? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you worked during summer vacations? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(\*Use separate sheet if needed)

Scholarship recipients will receive two payments, the first in September, the second at semester break. Continuation of this scholarship is contingent upon a review of your grades and progress towards a degree. It is up to you to send us a copy of your transcript at the end of each semester.

Living Faith Lutheran Church  
2915 Wright Avenue  
Racine, WI 53405  
262-637-5671

If you are awarded a scholarship grant, please list the address that the check should be mailed to:

\_\_\_\_\_