MICHIGAN DISTRICT LUTHERAN WOMEN'S MISSIONARY LEAGUE SCHOLARSHIP APPLICATION FOR CONCORDIA UNIVERSITY ENROLLED WOMEN STUDENTS PURSUING STUDIES IN PROFESSIONAL CHURCH WORK

This scholarship offer expires with the April 1, 2017 second application deadline. The award is limited to \$500 for the each of the 2016-2017, 2017-2018 academic years. The 2016-2017 Application deadline is Oct. 31, 2016. **The 2017-2018** application deadline is April 1, 2017. If you desire a second year of eligibility you must reapply, but have only to submit this 2 page application form for the second year. If awarded, \$500 will be sent to you for use towards your schooling costs. You will be notified as to your acceptance or denial of this scholarship after all applications are reviewed and the Scholarship Allocation Committee makes their decision. You must keep us informed in a timely manner as to any change in your status as a student if this change will affect your eligibility for this award.

INSTRUCTIONS: Please fill out application completely. Type or print clearly with black ink. Use N/A if not applicable. In addition to this 2-page application form with VII areas of questions there are three (3) reference forms, two (2) are for non-related adults to complete and one (1) is for your home congregation pastor to complete. Remember to include your required essay, referenced below, with your application.

| First | Middle | Last | |
|---|--|-----------------------------|---------------|
| Michigan Address | | | |
| College Address | | | |
| E-mail address (home □ university □) | | | |
| MI Phone | School Phone | | _ Age |
| . EDUCATION Do you intend to go into full-time profession | nal work for the LCMS? Yes | No Do not I | know |
| n which University or Seminary are you cu | rrently enrolled? | | |
| What vocation or profession is it that you a | re seeking? | | |
| What degree are you seeking at this time? | | | |
| f you plan to teach, indicate the level you p | orefer | | |
| Oo you plan to do graduate work? Yes | If Yes where? | No | do not know _ |
| Please check class level (year) in which you Iniversity/College or Seminary 1st Year | u are enrolled. 2 nd Year 4 rd Year 4 | th Year Intern _ | other |
| Vhat is your cumulative grade point averag | ge? | | |
| I. ESSAY REQUIRED On a separate sheet of paper please write a or choice enable you to serve the Lord? Include, | | | |
| II. CHURCH MEMBERSHIP Are you a member of a Michigan District LCMS f so, what is the name and of the congregation | | | |
| Congregation's Address | | | |
| | | | |

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|--|--|--|
| IV. SINGLE APPLICANTS Name of parents/guardian | | |
| Address | | |
| | Phone | |
| Father's Occupation | Mother's Occupation | |
| Are you claimed as a dependent by your parents? Yes | _ No Siblings?, If yes, ages | |
| V. MARRIED APPLICANTS Number of Children | Ages | |
| What is your anticipated income for the year? | | |
| Do you receive any financial support from your spouse toward | ards your schooling? Yes No | |
| VI. FINANCIAL Are you employed while attending school? Yes No | Approximate wages | |
| Do you have summer employment? Yes No | Approximate wages | |
| Are you having to take out loans and/or grants to help pay for List the grants or scholarship you have applied for. (Give note that the grants of scholarship you have applied for the grants of the gran | | |
| List the grants and scholarship you are or will be receiving. | (Give names and amounts.) | |
| What is your total debt for you college at the present time? | \$ | |
| What is your anticipated total costs for the school year (incl \$ | uding tuition, room/board, books & etc) | |
| Have you received previous scholarships from the Lutheran | Women's Missionary League? Yes No | |
| VII. REFERENCES Give the names of two (2) people (not related) and your past numbers. | | |
| | | |
| If possible, please enclose a photo that may be printed for rescholarship for the coming school year, all applications must and essay by October 31, 2016 for the 2016-2017 academic school year. All information is confidential to the scholarsh | st be filled out completely and returned with the references school year; and, April 1, 2017 for the 2017-2018 academic | |
| I declare that all the above information is true and accurate | to the best of my knowledge. | |
| Signature of Applicant | Date | |
| Return this application form to MI District LWML VP of Missio MI 49091, October 31, 2016 for the 2016-2017 school year; and this application make sure you include the required references. Grade point average, essay, references, and financial need. Fa | , April 1, 2017 for the 2017-2018 school year. Before sending All applications are evaluated on the following four categories: | |

7/24/14

automatic denial of this award.