## YOUR PASTOR'S REFERENCE Please give this your immediate attention. Complete and return by October 31, 2022 for 2022-2023 academic school year; or, August 31, 2023 for the 2023-2024 school year to: Scholarship Allocation Committee c/o Mary Craaybeek, 64585 Fair Rd., Sturgis, MI 49091 Applicant's Name\_\_\_\_\_ \_\_\_\_\_City \_\_\_\_\_\_Michigan \_\_\_\_\_ Address Has applied for the Lutheran Women's Missionary League scholarship. Your letter is required to have her application considered. How long have you known this student? By the activities of this applicant does she show that she would be a good candidate for a full-time church worker? Why do you feel she is worthy of this scholarship? Please make any other comments or observations you may have about this applicant. Signature\_\_\_ Address

You may use the back for additional space.

Date