

THE IMMANUEL EVANGELICAL LUTHERAN CHURCH OF NORTH MINNEAPOLIS SCHOLARSHIP

Instructions

Please read the instructions carefully for each section below, and provide the required information or attachments. Incomplete applications will not be considered.

Please type or print your answers legibly, using black or blue ink. For sections that require long responses, you may simply state "See Attachment A," etc. Then, type or print your response on a separate sheet. Be sure to label it appropriately.

You should keep a copy of the completed application for your records.

Deadline

The deadline for submitting this application and required attachments is June 1, 2011. Applications must be sent by mail and postmarked no later than this date.

Full Name _____

Street Address _____

City/State/Zip _____

Telephone Number _____

E-mail Address _____

Date of Birth (month/day/year) _____

Social Security Number _____

I am currently a member of the following LCMS Congregation within the Minnesota South District of the LCMS:

Congregation _____

Address _____

City/State/Zip _____

Phone number _____

Name of Pastor _____

Educational Institution

I am currently enrolled as a full-time student at the following LCMS college or university, or I am currently enrolled in a post-baccalaureate program at the following LCMS college, university or seminary:

Name _____

City/State/Zip _____

Phone Number _____

Name of Academic Dean _____

As of September, 2011, please indicate your year of study:

3rd Year Undergraduate

4th Year Undergraduate

Post-Baccalaureate

Other

Current GPA _____

(Please attach a copy of your most recent transcript with your cumulative GPA. An unofficial transcript is acceptable.)

What is the area of study or degree you are pursuing?

What are your career objectives in professional ministry or professional lay ministry?

Financial Information

Cost of Attendance (including tuition, fees, room & board, books, etc.):

Tuition and Fees \$ _____

Room and Board \$ _____

Books \$ _____

Other (Please describe.) \$ _____

Expected Family Contribution \$ _____
(This number is determined by the 2011-2012 FAFSA Student Aid Report. You must include a copy of this report with your application.)
Total Educational Grants \$ _____
Total Educational Scholarships \$ _____
Total Work Study \$ _____
Employer Assistance \$ _____
Other Financial Resources \$ _____

If you and your family have unusual circumstances, please explain them below. Examples: a family member who recently became unemployed; unusual medical expenses not covered by insurance, other circumstances that affect income.

Please submit a copy of your FAFSA Student Aid Report (not the FAFSA Application).

Essay

There are many opportunities and challenges that face inner-city congregations and their communities. Please submit with your application an essay that outlines your understanding of some of these opportunities and challenges. Assuming your objectives for a career in professional ministry or professional lay ministry, also include your recommendations for how you might address these opportunities and challenges within an inner-city congregation. The essay should be between 1000-2000 words in length. Submitted essays will be judged on spirit, clarity of thought, grammar and spelling.

Letters of Recommendation

Please attach two letters of recommendation, including one from your pastor, and one from a faculty member at your educational institution.

Signature

I certify that the information included in this application is accurate to the best of my knowledge. As an applicant for a scholarship award from the Lutheran Community Foundation, I hereby consent to the Foundation disclosing all of my application materials to the committee responsible for the selection of the scholarship recipient. It is my understanding that the members of the selection committee will further disseminate such materials only if, and to the extent, necessary to consider my application.

If I am selected to be a recipient of a scholarship award from the Foundation, I hereby consent to the Foundation disclosing my name as a scholarship recipient to the original donor and/or to the general public via correspondence, press releases, Foundation publications, or other similar means of announcement and acknowledgment.

My consent is indicated by my signature below.

Signature of Applicant

Date

Please mail this application and all attachments to:
The Immanuel Evangelical Lutheran Church of North Minneapolis Scholarship
c/o Lutheran Community Foundation
625 Fourth Avenue South, Suite 1500
Minneapolis, MN 55415