## TRINITY LUTHERAN FOUNDATION SCHOLARSHIP APPLICATION

This scholarship is available to students attending an LC-MS school who are preparing for a career in full-time church work in the Lutheran Church-Missouri Synod. The amount of this scholarship may vary from year to year due to the sources from which funds are available. Scholarships are available for up to seven years for those becoming pastors, and up to five years for those in other areas of church work. This scholarship will be sent to the school you attend to be used for tuition, room and board. When the scholarship is determined, you will be informed of the amount you will receive and when it will be sent to the school.

Complete the following form and return it to Trinity Lutheran Church, Attn: Foundation Scholarship, 212 West 12<sup>th</sup> Street, Grand Island, NE 68801 no later than March 15 prior to the academic year you will be attending school. You may also email to drenter@capc.com.

## PERSONAL

Name		Date of Birth		
First M	I Last		Mo/Day/Year	
Address				
Street	City		State	Zip
Telephone(s)		E-Mail		
Home Congregation	C	onfirmed Congreg	ation	
Connection with TLC, TLS	S or HLHS		Member	
Marital Status: single	married			
Ages of dependents (if any	)	Other Relations to	o TLC	
COLLEGE, UNIVERSITY O	R SEMINARY you	plan to attend	Graduate Stu	dies Y / N
Name				
Address Street	City		State	Zip
Begin date				k
Intended area of study (circ	cle one) Pastor	Teacher	DCE	Other

## **DECLARATION OF INTENT**

I, the above applicant, intend to study for a career in full-time church work. I will maintain a standard of academic excellence in my studies as determined by the school I attend. If I change my plans, I will inform you immediately. If I decide to no longer pursue a course of study in full-time church work as indicated above, I realize, as a matter of conscience, that I should repay this scholarship.

Applicant signature	Date
	2