

Toledo Lutheran Bowling League Since 1938

Scholarship Application

## Candidates for Ordination as a Lutheran Congregation Pastor

## Application should be received by June 1<sup>st</sup> for subsequent fall term

| Please Print Applicant's Name:        |                                    | A               | ge:    |                 |
|---------------------------------------|------------------------------------|-----------------|--------|-----------------|
| Address:                              | City:                              | State:          | Zip:   |                 |
| Date of Birth: Email:                 |                                    | Phone:          |        |                 |
| Marital Status: M S D W               | Sex: M F                           |                 |        |                 |
| Spouse's Name (if applicable):        |                                    |                 |        |                 |
| Spouse's Occupation:                  | Emplo                              | oyer:           |        |                 |
| Children (First Name and Age):        |                                    |                 |        |                 |
| Father's Name:                        |                                    |                 |        |                 |
| Father's Occupation:                  | Emplo                              | oyer:           |        |                 |
| Mother's Name:                        |                                    |                 |        |                 |
| Mother's Occupation:                  | Empl                               | oyer:           |        |                 |
| Siblings (First Name and Age):        |                                    |                 |        |                 |
| EDUCATION                             |                                    |                 |        |                 |
| High School Attended:                 | City/                              | /State:         |        |                 |
| College Attended:                     | City/                              | /State:         |        |                 |
| Graduation Date:                      | Degree:                            |                 |        |                 |
| What is your college cumulative point | t average?                         |                 |        |                 |
| Which Seminary are you attending?     |                                    |                 |        |                 |
| Indicate your upcoming seminary       | year (circle one): 1 <sup>st</sup> | 2 <sup>nd</sup> | Intern | 3 <sup>rd</sup> |
| Seminary to which application is subr | nitted for the coming academic     | year:           |        |                 |
| By what body are you registered or e  | ndorsed as a Theological stude     | ent:            |        |                 |
| Ministerial Career Interest:          |                                    |                 |        |                 |

## <u>CHURCH</u>

| Name of home church:   |                                |                            |                 |  |  |
|--|--------------------------------|----------------------------|-----------------|--|--|
| Address:   | City:                          | State:                     | Zip:            |  |  |
| Pastor:  | Synod:                         |                            |                 |  |  |
| Please attach a brief letter of recommendation your home church.   | n from either the Past         | or and/or the Congregation | on President of |  |  |
| FINANCIAL (For upcoming school year)   |                                |                            |                 |  |  |
| Do you plan to work at college?  | Where?                         |                            |                 |  |  |
| Approximately, how many hours per week?  |                                |                            |                 |  |  |
| Does your spouse plan to work?   | _ Where?                       |                            |                 |  |  |
| Anticipated College Expenses:  | Anticipated Source of Funding: |                            |                 |  |  |
| Tuition:   | Personal Savings:              |                            |                 |  |  |
| Fee's:   | Work at College:               |                            |                 |  |  |
| Books:   | Spouse's Work:                 |                            |                 |  |  |
| Rent:  | Scholarships:                  |                            |                 |  |  |
| Auto:  | Family Support:                |                            |                 |  |  |
| Utilities:   | Home Church Support:           |                            |                 |  |  |
| Other (Explain):   | Other (Explain):               |                            |                 |  |  |
| Total Projected Expenses:  |                                | Funding:                   |                 |  |  |
| Please identify (by narrative) any other pertine   | -                              | -                          |                 |  |  |
| Please submit a <u>brief</u> narrative of your person<br>Lutheran Church.  | -                              |                            |                 |  |  |
| Please return application to:  |                                |                            |                 |  |  |
| Toledo Lutheran Bowling League<br>C/o Steve Mawhorter<br>205 Park Lane<br>Walbridge, Ohio 43465<br>sdmawhorter@gmail.com | OR                             | <u>Any League Bowl</u>     | <u>er</u>       |  |  |