



Gustavus Adolphus Lutheran Church Endowment

Application for Scholarship—2019

Name _____

Address _____

City, State, Zip _____

Phone _____ Email _____

Year of High School Graduation: _____

Cumulative GPA: _____

Parent/s or Guardian/s Name/s _____

Parent's Employment _____

Parent's Employment _____

Siblings _____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

College/University/Technical School Attending: _____

Anticipated Graduation Year: _____

Will you be a full-time student? _____

1st Application _____ Re-application _____ Year in school: _____

Why did you choose this college?

Tell us about your most recent year/s of study and extra-curriculars.

What is your proposed major field of study and why did you choose it?

What is the estimated cost for the school you selected?_____

List any other scholarships/financial aid you will receive for the coming year.

What are your student employment plans (please include summer employment plans)?

What church or campus ministry will you attend while at college?

List faith/church/spiritual life activities you plan to participate in during the coming year.

How will your faith development at GA affect your time at college?

Who in the church has influenced your faith life and in what way?

List school and community activities in which you were involved and any awards and honors received this past year.

Signature of Student: _____

Signature of Parent or Faith Mentor: _____

Date: _____

Beginning this year we will require scholarship recipients and a parent to attend a financial education session in order to receive the GA Scholarship. These sessions will be held at GA on:

Sunday June 23 at 11:00 am

Wednesday July 10 at 7:00 pm

Tuesday July 16 at 2:00 pm

Please circle the session you plan to attend

SEND COMPLETED SCHOLARSHIP APPLICATION TO DAN SHOGREN, CHAIR – GA SCHOLARSHIP COMMITTEE AT shogrendan@gmail.com AND COPY maggie@gachurch.org. APPLICATIONS ARE DUE NO LATER THAN JUNE 30, 2019.