St. John's

Endowment and Memorial Committee



St. John's Evangelical Lutheran Church, P.O. Box 178, 119 W. 8th Avenue, Shakopee, MN 55379

STUDENT-ELCA COLLEGE SCHOLARSHIP APPLICATION

I am a member of St. John's and would like to submit my application for consideration of an educational scholarship for the school year fall 2020 through spring 2021.

Student Name:			
Student Address:			
ELCA College I will be at	tending:		
Program/Major area of stu	idies, if known:		
To date, the number of terms attended: Semesters Trimesters			Trimesters
College ID #:		-	
in my first through b) Application is for the new application for c) Any scholarship aw Office upon my belend Submittal of an apple e) Any scholarship aw scholarships.	fourth year of study. ne upcoming school year consideration each year. rarded will be paid direct half. lication is not a guaranty	only and that I ly to the college of receiving a soft equal value to	any previously awarded
Student Signature			Date
Parent/Guardian Signature	2		Date
	Committee Use O	nly	
Received	Date	Comments	
Action			Date