Hope Lutheran Church Scholarship

AWARD	One $500.00 award (non-renewable)
ELIGIBLE APPLICANTS	Any Linden High School senior who has been accepted into a college, university, trade school, or certification class for employment
CRITERIA FOR SELECTION	Applicants will submit a one-page essay describing "What My Faith Means to Me."
SELECTION COMMITTEE	Counselors Principals Pastor, Hope Lutheran Church
APPLICATION DEADLINE	Friday, March 20, 2020
AWARD ANNOUNCEMENT	Honors Assembly Friday, June 5, 2020

Hope Lutheran Church Scholarship

Name _____ Date of Birth _____
Last First Middle

Address _____ Phone _____

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Number of other children in family Older _____ Younger _____

Number of other children attending college next year _____

College or Vocational School _____ Program _____

Applied? Yes _____ No _____ Accepted? Yes _____ No _____

Have you applied for financial aid at a college? Yes _____ No _____

Have you previously been offered a college scholarship or other financial aid?Yes ____ No ____

List all extra-curricular activities in which you have participated in high school. Include school, community and church activities. Also list any employment while in high school and indicate the employer's name, address and length of employment.

Year	Activity	Office or Leadership Position	Employer

You may use the back of this sheet, if additional space is needed.
Please state any special circumstances which you feel qualify you for this award, including spare time activities that relate to your skill area. Also, state how this scholarship would help you achieve your career goals.

It is the student's responsibility to get their transcript through Parchment.com and attach it to this application.

Date: _____ _____
(Signature of Parent or Guardian of Minor)

Date: _____ _____
(Signature of Adult Student)