



# MOUNTAIN VIEW LUTHERAN CHURCH

## Mountain View Lutheran Church Educational Scholarship Application

### I. Applicant Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of and relationship to of the MVLC member or associate member who recommended you to apply: \_\_\_\_\_

High School attended: \_\_\_\_\_

High School GPA: \_\_\_\_\_ (on 4.0 non-weighted scale) Class rank: \_\_\_\_\_ out of \_\_\_\_\_

Please attach official high school transcript.

SAT scores: Critical Reading: \_\_\_\_\_ and/or ACT cumulative scores: \_\_\_\_\_

Math: \_\_\_\_\_

Writing: \_\_\_\_\_

Lutheran college to which applicant has been accepted:

\_\_\_\_\_

### II. Listing of School, Church, and Community Activities

Please include years active, name of activity, and your involvement. Note any offices which you have held. Attach a separate sheet if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### III. Listing of Employment

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### IV. Listing of Special Awards or Recognitions Received

Please include years, type of award, and reason received. Attach a separate sheet if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## V. Brief Explanation of College Expenses

The following expenses are expected to be incurred for the coming year:

\_\_\_\_\_ Registration  
\_\_\_\_\_ Tuition  
\_\_\_\_\_ Transportation  
\_\_\_\_\_ Room & Board  
\_\_\_\_\_ Textbooks  
\_\_\_\_\_ **TOTAL**

Amount of money expected from other sources:

\_\_\_\_\_ Family  
\_\_\_\_\_ Earn during summer  
\_\_\_\_\_ Earn during school year  
\_\_\_\_\_ Loans, scholarships  
\_\_\_\_\_ Other  
\_\_\_\_\_ **TOTAL**

## VI. Vocational Intent

Briefly state your educational goals and plans for future ministry:

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## VII. Recommendation

Please attach one written recommendation from an adult other than a family member.

## VIII. Personal Essay

Please attach a one-page personal essay describing the process by which you arrived at your current career plan. Include events or person(s) that influenced your choice. Also include your personal strengths, qualities, and/or characteristics. Include the events or person(s) who helped you develop those qualities.

**APPLICATION** for scholarships must be made to the Scholarship Committee before April 15<sup>th</sup> or at least by two (2) months prior to the beginning of the school year. Written notification of the amount of the scholarship will be sent to each applicant within 60 days.

The Scholarship Committee will judge each applicant on his/her own merits.

I understand that this scholarship grant will be paid directly to the school which I attend which will be \_\_\_\_\_, located in \_\_\_\_\_. I have read the Policy Statement and Program Requirements regarding this grant and intend to comply with such regulations and keep the Committee informed of my progress.

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent /Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_