

**TRINITY LUTHERAN CHURCH
CALLED INTO MINISTRY
SCHOLARSHIP APPLICATION**

Date of Application: _____ Due Date: July 1, November 1

Name: _____

Home Address: _____

Home Phone: _____

E-mail Address: _____

Birthdate: _____

Married? _____ Children? (Ages) _____

College/University/Seminary Attending: _____

Street Address: _____

City/State/Zip: _____

Phone No. of School: _____

Year in School: _____

Church Work Area of Study: _____

Home Congregation: _____

By submitting this application for a financial scholarship from Trinity Lutheran congregation, I am affirming that I am a member in good standing of Trinity Lutheran Church, Bloomington, IL. I also understand that this is a gift to financially assist me in my educational preparation to be commissioned into full-time ministry in the Lutheran Church-Missouri Synod. If I should fail to fulfill this goal, I shall consider it my moral obligation to repay the money received to the Scholarship Fund of Trinity Lutheran Church.

Signature of applicant: _____

Date signed: _____

(Fill out back of application)

List church activities in which you have been involved.

A. Home:

B. College/University/Seminary:

What characteristics do you see you have been given which will help you in your chosen field?

Who or what led you to prepare for full time church work?

What are your five year goals?

What other information would you like the committee to take into consideration?