Faith Lutheran Church of Chico, California

SCHOLARSHIP FOR COLLEGE, TECHNICAL, TRADE AND GRADUATE SCHOOL STUDENTS

The Women's Ministry of Faith Lutheran Church, Chico, California, is offering a scholarship in the amount of \$1000 to acknowledge student achievements in academic and volunteer service in school, church, and community.

QUALIFICATIONS

Applicant must be a member of Faith Lutheran Church, Chico, California. Applicant must plan to attend a university, community college, trade, technical, or graduate school as a full time student for the upcoming year.

TO APPLY, APPLICANTS MUST:

- Fill out the attached application.
- Provide two reference letters by non-family-members (e.g. teachers, advisors, pastors, or employers). Reference letters must be written specifically for this scholarship application.
- Send in their high school transcript or equivalent.
- Send in a recent photograph.

Application should be mailed to:

Faith Lutheran Church ATTN: Women's Ministry 667 E. 1st Ave. Chico, CA. 95926

Deadline for this application is	Applicants
will not be considered if postmarked or received after the deadline date. Rec	ipient of the
award will be notified within two months from this date.	

SELECTION

The recipient of this scholarship will be chosen by a church committee. After the recipient is notified, proof of enrollment in one of the above schools, along with a thankyou letter to the Women's Ministry of Faith Lutheran Church, Chico, California, must be provided. Upon receiving this information, a check in the amount of \$1000 will be given to the recipient.

WOMEN'S MINISTRY OF FAITH LUTHERAN CHURCH, CHICO, CALIFORNIA – SCHOLARSHIP APPLICATION

Please type or print legibly. This application must be received by the Women's Ministry of Faith Lutheran Church, Chico, California no later than the date mentioned on the previous page.

Last Name	First Name	Middle Name
Street Address		
Apt. No.	State	Zip
Mailing Address (if different than s	treet address)	
	State	Zip
Home phone ()	Cell phone ()
Email address		
School name		
School address (include city, state,	zip)	

 $Faith\ Luther an\ Church\ |\ 667\ E.\ 1^{st}\ Ave.\ Chico,\ CA.\ 95926\ |\ 530.895.3754\ |\ office@chicofaithluther an. org$

Name of the school recipient will be attending				
Intended major/course of study				
On a separate piece of paper or attachment, please provid	e the following:			
 State your reason for applying for this scholarship Describe in detail any community service/respons Include career plans, goals, objectives, and other i to the selection committee. Describe all church service activities and extracur in. (Please do not use abbreviations for organizations. List any academic, sport, or club-related awards y years. List your last year of employment history if applications. 	ibility you may have. Information you feel would be valuable ricular activities you have been active ons.) Ou have received during the last 4			
ESSAY QUESTION What do you feel is the most pressing issue our country fa (Minimum 250 words, not to exceed 500 words.)	aces, and what is your solution?			
(Initial) I give permission for my name to be releas scholarship.	ed in a news release concerning this			
Applicant signature	Date			

INSTRUCTIONS FOR SENDING APPLICATION PACKET

Please return the application packet in the following order:

- 2 application pages (Women's Ministry of Faith Lutheran Church, Chico, California – Scholarship Application)
- 2. Copy of school records and attendance
- 3. Questions 1-6
- 4. Essay question
- 5. Reference forms (2) with sealed letters
- 6. Photograph

Application should be mailed to:

Faith Lutheran Church ATTN: Women's Ministry 667 E. 1st Ave. Chico, CA. 95926

WOMEN'S MINISTRY OF FAITH LUTHERAN CHURCH, CHICO, CALIFORNIA

REFERENCE FORM FOR SCHOLARSHIP APPLICATION

This form is to be completed by a non-family-member (e.g. teacher, advisor, pastor, or employer, etc.). Reference letters must be written specifically for this scholarship application. The purpose of this scholarship is to acknowledge the achievement of students for academics and volunteer service in their school, church, or community.

Name of student:			
In what capacity do you know	w this student?		
On a separate paper or attaching an evaluation of thand personal achievements,	eir abilities, attitudes, an	d potential. Please not	e academic
Your name and position			
Mailing Address	City	State	Zip
Email address	Phon	Phone number	
Signature		 Date	

Please put your response in a sealed envelope and return it to the student to place in their scholarship application packet.

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