



Date ____/____/____

Applicant is (check one) ____ New ____ Renewal

To submit your application please include these items:

- ____ Completed Application, signed and dated
- ____ Essay Questions Response (new applicants only, see back of application)
- ____ Two Letters of Reference (new applicants only)

Personal Information:

Name (first, Last) _____

Address _____ City _____ State _____ Zip _____

Phone _____ - _____ - _____ Date of Birth ____/____/____ Age _____

Gender M F Married Y N

Student Email _____ Parent Email _____

School Information: (please check appropriate area(s) below)

(renewal applicants, please also include a complete transcript of grades with application)

This term will be at a:

____ 2-year college ____ 4-year college ____ Applying for a vocational grant

School Name _____ City _____ State _____

This term I will be a: ____ First-year student ____ Sophomore ____ Junior ____ Senior

School Year Begins ____/____/____ Ends ____/____/____

Expected Graduation Date ____/____/____ Major _____ GPA _____

Returning Students: Student ID # _____

New Applicants: Please tell us (in short essay form) why you chose this particular college or vocational school, what your expected educational goals are, how you will share your Christian life with others, and how your Christian values have made a difference in your life and the lives of others you have interacted with, while reaching this part of your life. God’s blessings on you!

Please attach two letters of recommendation with you application
(not required with **renewal application**)

Student Financial Information:

(Expenses for **one academic year**, refer to your school’s website for **estimates**)

Annual Tuition	\$ _____
Fees (Books, Supplies)	\$ _____
Room/Board	\$ _____
Travel	\$ _____
Other _____	\$ _____
Total Expenses	\$ _____

Applicant,

By signing this application, you agree, if asked, to provide additional information that will verify the accuracy of your completed application. If you purposely gave false information, you will be permanently disqualified from this grant program.

Zoar Lutheran freely gives to its members and will continually pray for the future of said members for continuing education so that your life will be a gift to the service of Our Lord Jesus Christ. God be with you and bless your life!

Signature _____

Name (printed) _____

Date ____/____/____

Information below will be filled out by the Endowment Committee

Reviewed: _____

Approved: Yes No Amount: \$ _____

Date ____/____/____