

ALL SAINTS LUTHERAN CHURCH – BOWIE, MD
SCHOLARSHIP RENEWAL APPLICATION – CONTINUING STUDENTS
ACADEMIC YEAR 2017

NAME: _____ E-mail: _____

ADDRESS: _____ Telephone: _____

LIST PREVIOUS ALL SAINTS SCHOLARSHIPS: _____

PERIOD OF SCHOLARSHIP REQUESTED: 1 Term ___ 2 Terms ___

NAME OF COLLEGE/SCHOOL YOU WILL BE ATTENDING & DATES:

PLANNED MAJOR/MINOR or COURSE(S) OF STUDY: _____

PLANNED GRADUATION/COMPLETION DATE(S): _____

PLANNED DEGREE(S), CERTIFICATES, LICENSES AND DATES:

CHURCH, COMMUNITY & HIGHER EDUCATION ACTIVITIES:

(PLEASE INCLUDE WHAT HAS BEEN MOST MEANINGFUL TO YOU, AS WELL AS AND ANY OFFICES HELD & AWARDS OR RECOGNITION RECEIVED):

Mail or Deliver to:

All Saints Lutheran Church
Attn: Scholarship Committee
16510 Mt. Oak Road
Bowie, MD 20716

Email to: church@allsaintsowie.org

DUE: MAY 14, 2017

**THANK YOU FOR YOUR COMMITMENT TO ALL SAINTS AND
HIGHER EDUCATION**