

**SCHOLARSHIP APPLICATION
FAITH LUTHERAN CHURCH-BISMARCK ND**

NAME _____ DATE OF BIRTH _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
TELEPHONE NUMBER _____
E-MAIL ADDRESS _____
FATHER'S NAME _____ ADDRESS _____
MOTHER'S NAME _____ ADDRESS _____

ARE YOU A CONFIRMED MEMBER OF FAITH LUTHERAN CHURCH? _____

PLEASE LIST THE CHURCH ACTIVITIES IN WHICH YOU HAVE PARTICIPATED _____

PLEASE LIST THE ACTIVITIES OUTSIDE OF CHURCH (SCHOOL/COMMUNITY) IN WHICH YOU HAVE PARTICIPATED _____

WHICH ELCA INSTITUTION OF HIGHER LEARNING WILL YOU BE ATTENDING? _____

NEXT YEAR SCHOOL LEVEL(F,S,JR, SR) _____
WHAT IS YOUR LATEST GRADE POINT AVERAGE BASED ON A 4.00 GRADING SCALE SYSTEM? _____

SIGNATURE _____ DATE _____

PLEASE MAIL THIS APPLICATION ALONG WITH A CERTIFIED COPY OF YOUR LATEST TRANSCRIPT TO:

FAITH LUTHERAN CHURCH
1402 EAST AVENUE C
BISMARCK ND 58501-4398
ATTN: LEARNING TASK GROUP