



Dear Applicant:

We are happy that you are thinking of attending a college of the ELCA and know that it will be a blessing to you, your family, and your career. To be eligible for a scholarship from the Northwestern Minnesota Synodical Women's Organization, you must meet the following criteria:

1. Be a graduating High School Senior with a "C" average or above.
2. Be a member of an ELCA Church.
3. Be a resident of the Northwestern Minnesota Synod of the ELCA.
4. Be attending an ELCA College.

Students receiving a tuition discount because their parent(s) are employed at an ELCA college would NOT be eligible.

It is the responsibility of the applicant to have the pastor and school administrator complete the form and return it to the applicant. The enclosed form and return it to the applicant. The enclosed application, properly signed must be completed and postmarked no later than May 1, 2019. The Scholarship Committee will meet shortly thereafter to determine eligibility.

The scholarship is awarded to second semester college freshmen to be used for tuition or books. If sufficient funds are received from the local congregational units of the NW MN Women of the ELCA, \$250.00 per eligible applicant will be allocated. It will be matched by most of the ELCA colleges that our students attend. The scholarship money is sent directly to the college. Students will be notified by the end of May of the scholarships awarded.

Please contact me with any questions you may have.

Yours in Christ,

Lois Balko, Scholarship Committee
209 7th St South
Moorhead MN 56560
218-329-8320
lkbernko@gmail.com



Student Scholarship Application
For High School Seniors Applying to an ELCA College
NW MN Synodical Women's Organization

Name: _____ Date of Birth: _____

Address: _____ E-Mail Address _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Male: _____ Female: _____

Father's Name: _____ Living: _____ Deceased: _____

Father's Occupation: _____ Place of Employment: _____

Mother's Occupation: _____ Place of Employment: _____

List Siblings and Their Ages: _____

Name and address of congregation of which you are a member: _____

Pastor's Name: _____

List church organizations to which you have belonged or belong to now and offices you have held: _____

List school and community organizations to which you have belonged or belong to now and honors or recognitions you have received: _____

List the complete name and address of the college of the ELCA (Evangelical Lutheran Church of America) you plan to attend after graduation from High School: _____

What Career do you have in mind after completing your post-secondary education? _____

Write a brief paragraph about yourself including what Christ has meant to you in your life:

Pastor's Statement

Applicant's Name: _____

Comments:

Name of Pastor: _____

Date: _____ Phone Number: _____

School Verification

Applicants Name: _____

School Name: _____

Address: _____

Applicant's Approximate GPA _____

Comments: _____

Signed: _____ Date: _____



Return to: Lois Balko, Scholarship Committee DEADLINE: May 1, 2019 (Postmarked on or before)
209 7th St South
Moorhead MN 56560
218-329-8320
lkbernko@gmail.com