You must either type or print all your answers neatly in ink. Application response may be delivered to the church office or mailed to **GSLC Attn: Endowment Committee 876 Grove St. Conneaut, OH 44030. Scholarship application, transcripts, and letters of recommendation must be provided together.**

1. **Personal Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

 Last First MI

Permanent Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

 Number and Street City State Zip code

Phone: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_

1. **Scholastic Information:**

What year did/will (circle one) you receive a high school diploma or GED (circle one)? \_\_\_\_\_\_\_

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_ GED: \_\_\_\_\_\_\_\_\_

 Name City State County

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 GPA

Post-Secondary Facility GPA through January 2025: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 Undergraduate GPA Graduate GPA

Post-Secondary Facility Attending/Attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Post-Secondary School

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dates Attended Year did/will receive degree

1. **Post-Secondary School choice for 2025-2026** Student ID #: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Post-Secondary School Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Office and Address where scholarship mailed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Major or Field of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_

 City State Zip code

1. **Employment Information:**

Are you currently working 20 hours or more per week (Y/N)? \_\_\_\_\_\_\_\_\_\_

Location of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Company

Do you plan to work 20 hours or more per week during the 2025-2026 school year (Y/N)? \_\_\_\_\_

(If Yes) Location of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Company

1. **Recommendations:**

Letters of Recommendation: Please provide one letter from a school official, one letter from a current GSLC Congregation Member, and a third letter from whomever you choose.

Self-Recommendation: Please provide (Times New Roman, 12pt font, double-spaced) 1000-1500 word personal reflection to cover the following:

a. Spiritual growth to include how God has impacted your life within and outside the classroom.

b. Ecumenical (other denomination and faiths) interactions

c. Spiritual practices on/off campus

d. Personal reflection of current events through your spiritual lens.

e. Why you feel this scholarship will benefit you as a student and as a Christian.

1. **Acknowledgement:**

I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form, my transcripts, and any additional supporting documentation submitted as part of this application. I give permission for selection committees to contact high school and/or post-secondary school officials for additional academic information.

I agree that all submitted forms, letters of recommendations, and all accompanying documentation, is the sole property of Good Shepherd Lutheran Church and the outcome of the scholarship request (if approved) can be published within the congregation of Good Shepherd Lutheran Church through the church ECHO Newsletter.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_