

Florida-Georgia District
Lutheran Women's Missionary League
SCHOLARSHIP
APPLICATION and GUIDELINES - 2015

A valid application for an LWML scholarship will include all of the information listed on page 2 of these guidelines.

- Send the **original application** to the LWML Scholarship Chairman.
- Send a **copy** of the application to the District Student Aid Task Force.

Materials must be received by JUNE 1, 2015 by the LWML Scholarship Chairman:

Sharlene Miers, LWML chairman
4870 Gopher Circle
Middleburg, FL 32068
(904) 282-6520
themiers@bellsouth.net

Lois J. Ford, Task Force Chairman
118 E. Wilt Ave.
Eustis, FL 32726
352- 357-2641
lwmllouisford@yahoo.com

INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED.
INFORMATION ON THE LWML SCHOLARSHIPS

Prayerfully given Mites from members of the Florida-Georgia LWML are designated for specific projects by action of the LWML in convention. One of these projects is Scholarships. The LWML seeks to enable qualified and dedicated men and women to train for service to the Lord as full-time church workers through these scholarships.

1. The Scholarship Funds are administered by the Scholarship Committee appointed by the LWML Executive Board and are granted to students preparing for full-time church work in Missouri Synod schools and churches.
2. Applicants must have been a member of a congregation of the FL-GA, SELC or English District of the LC-MS in the states of Florida or Georgia for the eighteen(18) months prior to filing an application, and be enrolled full-time in a rostered church worker program.
3. Scholarships ranging from \$500 to \$2000 each will be awarded for the school year 2014-2015 depending on maintenance of GPA, and will be given in two installments, half at the beginning and half at mid-point of the school year.
4. Applications for an LWML Scholarship must be made on the form provided, completed and in the hands of the committee chairman by the deadline of June 1, 2015.
5. The Scholarship Committee shall process all applications received by the chairman and select the recipients. A GPA of 3.0 is necessary to qualify for a scholarship and financial need must be shown. **Love Gifts** may also be awarded to those who have less than a 3.0 GPA.
6. Students who are qualified and desire a scholarship another year must reapply each year. Only one scholarship per family per year will be awarded. LWML **Love Gifts** may be available to additional members of the same family.
7. Contact the scholarship chairman for further information. Additional applications are available from the FL/GA District: www.flga-lcms.org, or the LWML: www.flgalwml.com

In fairness and courtesy, recipients should notify the committee chairman of any intention to withdraw from school, or Church worker preparation.

In accepting an LWML Scholarship, should a recipient leave the Lutheran Church or not accept placement within the synodical system, he/she agrees to be obligated to repay all scholarship money received. Thank you.

Florida-Georgia District
Lutheran Women's Missionary League
SCHOLARSHIP
APPLICATION and GUIDELINES - 2015

Note: This Application is due each year in which Student Aid is desired.

A completed application packet for an LWML Scholarship and/or District Student Aid in 2015 will include:

1. A completed **application** form, pages 3 & 4.
2. A recent **photo**, suitable for publication. Digital photos may be emailed.
3. A **transcript** from the school last attended.
4. A **statement of financial need** from a dependent student's parents.
OR - A personal statement of financial need from independent students.
5. A signed **letter** outlining your: **a.)** vocational calling, **b.)** goals, **c.)** previously attended schools, **d.)** activities, and **e.)** plans for educational financing.
6. Three (3) **current letters of recommendation** as noted on the application.
7. A copy of your and/or your parents' **2014 Income Tax returns**.
8. **Signatures** on the application (#1) and outline letter (#5).
9. A completed **District Financial Aid Application** from the college or seminary. Please obtain a "**District Financial Aid Application**" from your school's financial aid office. Fill out "Section I: Student." Ask the financial aid officer to fill out "Section II: College or Seminary," and forward it to the Student Aid Task Force.

Completed application packets must be in the hands of the Student Aid Task force by June 1, 2015. We will be **unable to consider incomplete applications**. Please forward all application materials to:

Ms. Lois Ford, Chairperson
FL/GA District Student Aid Task Force
118 E. Wilt Ave.
Eustis, FL 32726

- Student Aid is available to members of the FL/GA District Congregations training for full-time service in the LC-MS, and attending one of our Concordia University System colleges or seminaries.
- Student Aid awards are based on need, scholastic progress, and aptitude.
- The following are additional sources of financial assistance: your parents, your parent's congregation, your home or vicarage congregation. Requests may be made through the Pastor of the congregation.
- Ministerial scholarships are also available from the Munderloh Foundation, St. James Lutheran Church, 170 McMilan Road, Grosse Pointe Farms, MI 48236
- Be sure to keep a copy of the application for reference in future years.

Inquiries may be made to Ms. Lois J. Ford: 352-357-2641 hm
352-989-2188 cell

E-mail: wmlloisford@yahoo.com

Florida-Georgia District
Lutheran Women's Missionary League

SCHOLARSHIP

APPLICATION and GUIDELINES - 2015

Please read and follow exactly the guidelines and instructions below.

Return a completed application packet to **each organization** by June 1, 2015.

Applicant's Name _____
Address _____
City/State/Zip _____
Phone (____) _____ E-Mail _____
Date of Birth ___/___/___ Married/Single _____ Number of Children _____

I am applying for: (check one) _____-LWML Sch. _____-FL/GA Fin. Aid _____-Both
I have been a member of the Florida/Georgia District - LCMS for ___ years, since _____
Attending Concordia Seminary/University, City _____ State _____
Class Level in '15-'16: (Circle One) Fr. So. Jr. Sr. Sem. I II III IV Vicar Other
Full-time church work in the LC-MS for which I am preparing: _____

On a separate sheet outline:

- A. Your basis for choosing this career.
- B. Your educational plans and goals.
- C. Previously attended schools and degrees granted.
- D. Your extracurricular activities, past and present.
- E. How you are assisting in financing your education.

Three Letters of Recommendation are required and should be sent directly to the chairperson of each respective scholarship program.

1. From the Pastor of the applicant's home congregation affirming church membership and recommendation for scholarship.
2. From the student's previous school's principal, administrator, or other authorized person.
Second career students – from your immediate supervisor at work.
3. From a mature, responsible person other than the Pastor, a relative, employer, or school representative. State in what capacity the writer knows the applicant.

2014 Income Tax Return

Dependent Students, **submit copies of both parents' and your own** income tax return.
Independent Students, **submit copies of your spouse's and your own** income tax return.

DEPENDENT STUDENT

Father's Name Occupation Income

Mother's Name Occupation Income

Number of persons dependent on these two incomes _____ Number in college _____
Names and grade levels of siblings _____

INDEPENDENT STUDENT

Applicant's Name Occupation Income

Spouse's Name Occupation Income

Names & Ages of Children _____

Florida-Georgia District
Lutheran Women's Missionary League
SCHOLARSHIP
APPLICATION and GUIDELINES - 2015

How many years have you received aid from these scholarship programs? _____
(LWML and/or FL/GA)

Total amount of Student Loans taken out to date: \$ _____

List the institution's estimated cost of your education for the 2015-2016 year.

Tuition	_____
Room & Board	_____
Books & Supplies	_____
Fees	_____
Transportation	_____
Other Expenses	_____

TOTAL EXPENSES _____

List the applicant's estimated support and income for the year's education.

Applicant's Earnings	_____
Spouse's Earnings	_____
Parental Support	_____
Support from your home congregation, Friends, Relatives, Etc.	_____
Scholarships / Grants Confirmed for the year	_____

TOTAL PRESENTLY AVAILABLE _____

Scholarships / Grants / Other Support **Pending** - Total Amount _____

***Acknowledgments: I understand and agree that this application is for 2015 only.
New Applications must be re-submitted each year.
In submitting this application I grant the FL/GA District permission to
use my information in God pleasing ways.***

To the best of my knowledge, the above statements are full, complete, and true.

Dependent Student's Signature _____

Dependent Student Parent's Signature _____

Independent Student's Signature _____

Independent Student Spouse's Signature _____

Date ____ / ____ / ____