# ST. JOHN’S SCHOLARSHIP APPLICATION

## [2021-2022 ACADEMIC YEAR]

**GENERAL INFORMATION & INSTRUCTIONS**

### APPLICATION DEADLINE:

Friday May 7, 2021 at 5:00 pm PDT

***NOTE:*** *Incomplete applications will not be considered.*

The scholarship program exists to assist qualified students who are members of St. John's Lutheran Church, Sacramento, California. Two St. John’s scholarships, each in the amount of $3,000, will be awarded.

### These scholarships will:

* Be awarded on the basis of academic performance, church life, extracurricular activities and financial need.
* Be open to student members of St. John's Lutheran Church.

### Other Guidelines:

* A St. John's Scholarship committee appointed by the St. John’s Church Council will administer the funds and select who will receive scholarships.
* Scholarships will not automatically be renewed for succeeding school years. Current recipients must submit a new application each year and are not guaranteed to be awarded another scholarship.
* Previous applicants who were not selected can reapply.
* Deadlines for applications to be submitted will be followed.
* All other information submitted to the committee will be held in the strictest of confidence.
* The names of those receiving scholarships will be published and distributed to the congregation. However, all other information will be destroyed.
* No members of St. John’s staff or children of staff members may apply.

### Instructions:

You must submit this completed application form and all supplementary sheets to St. John’s Lutheran Church by the application deadline of May 7, 2021 at 5:00 p.m.

## APPLICATION CHECKLIST

### APPLICATION DEADLINE:

**Friday, May 7, 2021** at 5:00 pm PDT

*Be certain to submit a complete application because incomplete applications will not be considered.*

Before you send or deliver your application to St. John’s Lutheran Church, be sure you have included ALL of the following:

###### Is the application complete? Is the submission deadline met? Are you a member of St. John's?

######  Academic - High School (Submit transcripts with your GPA and percent standing in your class) College/University (Submit latest transcripts)

######  Church Life – Typed essay; one page, double spaced.

######  Interests, Activities, Community Service - Typed essay; one page, double spaced.

######  Financial Need - Typed essay; one page, double spaced.

######  Signed Applicant’s Certification

###### Signed letters of recommendation from an educator and a church leader.

### Send or bring your completed application to:

St. John’s Lutheran Church 1701 L Street

Sacramento, California 95811 Attn: Scholarship Committee

**OR Email**

Scholarships@stjohnslc.-org

## PERSONAL INFORMATION

##### Please type. Do not use initials or abbreviations.

Name in Full:

Last Name First Name Middle Name

**Address where mail will reach you around mid-June:**

Number and Street

City/Town State ZIP Code

Telephone E-mail

## GRADUATING HIGH SCHOOL SENIORS

### To which colleges/universities have you applied for admission and been accepted?

|  |  |  |
| --- | --- | --- |
| 1.  | Accepted | Attending |
| 2.  | Accepted | Attending |
| 3.  | Accepted | Attending |
| 4.  | Accepted | Attending |

**EDUCATIONAL HISTORY**

High School City/Town State Dates Attended (MM/YY)

High School City/Town State Dates Attended (MM/YY)

College/University City/Town State Dates Attended (MM/YY)

College/University City/Town State Dates Attended (MM/YY)

## APPLICANT’S CERTIFICATION

I hereby apply for the St. John’s Scholarship from St. John’s Lutheran Church. I certify that I am a member of St. John's Lutheran Church in Sacramento, California. I certify that all of the information in this application is true to the best of my knowledge. I agree that if I am awarded a St. John’s Scholarship, I will fulfill the terms of the scholarship. I understand that the scholarship is not renewable, but that I may apply again with no guarantee of being awarded another scholarship.

Applicant’s Signature Date

##  ESSAY RESPONSES

## Church Life (30 Points Maximum)

In essay one, describe your activities at St. John's or at your college church. Describe the church’s role in shaping how you live God’s love in the world. Please be sure to explain what living God’s love in the world means to you in pursuing your professional goals. Include a discussion of how you hope this scholarship will enable you to continue this work.

1. **Interests & Activities (25 Points Maximum)**

In essay two, detail your most significant interests, activities, and community service. If you are completely immersed in one activity or interest, describe that involvement. Please indicate the organizations, positions held, time and length of your involvement.

1. **Financial Need** **(20 Points Maximum)**

In essay three, explain your need for these funds. Explain how this financial aid will help you meet your goals and how you will use the funds. Indicate whether there is any information the committee should consider, such as jobs or unique family circumstances. Please justify your need for the scholarship. All information will be kept in strictest confidence with all documents destroyed after the process is complete.

## RECOMMENDATION FORMS & TRANSCRIPTS

### Recommendation Forms:

###### Recommendations should be completed by:

* + One academic instructor
	+ One pastor, church leader (clergy or lay) or other congregational member

Applicants should complete Section I and have the recommending party complete Section II of the Recommendation Forms. Applicants should inform those completing these recommendations of the deadline for scholarship applications and church employees are encouraged to submit their recommendations on official letterheads.

Recommendations should be submitted directly to St. John’s Lutheran Church to the attention of the Scholarship Committee or should be submitted by the applicant in a sealed envelope with the signature of the educator or church employee across the seal.

### Transcript:

Provide a current transcript from the high school or college most recently attended. The transcript must indicate your GPA and where you stand as a percentage of your class.

# ST. JOHN’S SCHOLARSHIP APPLICATION

## [2021-2022 ACADEMIC YEAR]

## RECOMMENDATION FORM: ACADEMIC

**Section I: *To be completed by the applicant - Absolute deadline is May 7, 2021***

I, , waive do not waive my right to review the Recommendation Form.

Name of Applicant

Applicant’s Signature Date

#### Section II: To be completed by an academic instructor (Absolute deadline is May 7, 2021)

##### Educators are encouraged to submit their recommendations on official letterhead together with this form.

\* You may use the back of this form or another sheet of paper.

1. In what capacity and how long have you known the applicant?
2. How firm is the applicant’s commitment to his/her academic success?
3. How would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Leadership | Excellent | Very Good | Average | Below Average |
| Academic Potential | Excellent | Very Good | Average | Below Average |
| Seriousness of Purpose | Excellent | Very Good | Average | Below Average |
| Enthusiasm | Excellent | Very Good | Average | Below Average |
| Maturity | Excellent | Very Good | Average | Below Average |
| Community Service | Excellent | Very Good | Average | Below Average |

1. Please cite specific examples of how the applicant has demonstrated the qualities listed in question 3.
2. Additional comments are welcomed.

Name Title or Position

Telephone Email

Institution

Signature of Recommender Date

# ST. JOHN’S SCHOLARSHIP APPLICATION

## [2020-2021 ACADEMIC YEAR]

**RECOMMENDATION FORM: CHURCH INVOLVEMENT**

#### Section I: To be completed by the applicant -Absolute deadline is May 7, 2021

I, , waive do not waive my right to review the Recommendation Form.

Name of Applicant

Applicant’s Signature Date

#### Section II: To be completed by a pastor, ministry supervisor (clergy or lay), or other congregational member

##### Church employees should submit their recommendations on official letterhead together with this form.

\* You may use the back of this form or another sheet of paper.

1. In what capacity and how long have you known the applicant?
2. How has the applicant been involved in the ministries of the congregation?
3. How would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank.

Leadership Academic Potential

|  |  |  |  |
| --- | --- | --- | --- |
| Excellent | Very Good | Average | Below Average |
| Excellent | Very Good | Average | Below Average |
| Excellent | Very Good | Average | Below Average |
| Excellent | Very Good | Average | Below Average |
| Excellent | Very Good | Average | Below Average |
| ExcellentExcellent | Very GoodVery Good | AverageAverage | Below AverageBelow Average |

Seriousness of Purpose

Enthusiasm

Maturity

Church Life

Community Service

1. Please cite specific examples of how the applicant has demonstrated the qualities listed in question 3.
2. Additional comments are welcomed.

Name Title or Position

Telephone Email

Institution

Signature of Recommender Date