



SALEM SCHOLARSHIP AWARDS PROGRAM APPLICATION AND SUBMISSION INSTRUCTIONS

Dear Scholarship Applicant:

Thank you for your interest in the Salem Lutheran Church Scholarship Awards. Salem has been blessed in receiving several endowments and bequests from church members that have allowed us to establish this scholarship opportunity. Our Scholarship Committee has designed this application form and process in order to learn more about our candidates.

REQUIRED DOCUMENTATION (See Submission Instructions, below, for each.)

- An official copy of your latest transcript**
From the school you are currently attending or have most recently attended
- Two letters of recommendation**
One, from a teacher, extra-curricular advisor, or employer; the other from a member of Salem (other than a member of your immediate family)
- Completed Salem Scholarship application**
Applicant should answer all questions included in this packet in a detailed and thoughtful manner.

Please submit all items together (application, transcript and recommendation letters) in one large envelope marked “*Scholarship Committee*” to the church office by **April 15th**.

The Scholarship Committee will contact you to schedule a brief and informal interview.

Submission Instructions:

- 1) **TRANSCRIPT:** The transcript must be stamped “OFFICIAL” and should be in a sealed envelope directly from the institution. As schools sometimes take time to process these requests, take care of this requirement right away.
- 2) **RECOMMENDATIONS:** Attached to this application are copies of the recommendation form for the two people you ask to serve as your references. Review the form together with them to find out if they have any questions or need additional information. Provide each recommender with a self-addressed stamped envelope; the recommender is instructed to seal the envelope and place her/his signature over the seal to ensure confidentiality. Ask the recommender to return the form to you prior to April 15th to ensure that you can submit all materials together for your application.
- 3) **APPLICATION:** Complete all questions and portions of the application. Please provide thorough and thoughtful answers for each item in order to provide the Scholarship Committee with an accurate picture of your experience and your college/career aspirations. Take time to review your answers and carefully check for spelling, grammar/usage, and punctuation errors. TYPED applications are requested.

If you have any questions about the application or process, please contact either Pastor Asendorf, or Sue Gdovin at (410) 458-7198 or Gdovin409@gmail.com



SALEM SCHOLARSHIP AWARDS PROGRAM - APPLICATION

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|--|-------|--------|--|
| PART I: PERSONAL INFORMATION | | | |
| Applicant Full Name <i>(first, middle, last)</i> : | | | |
| Address: | | | |
| City, State and Zip Code: | | | |
| Contact Information: | Home: | Cell: | |
| | | Email: | |

I am a communing member of Salem Evangelical Lutheran Church (Catonsville, MD) and have been a communing member for a period of at least one or more years.

Signature: _____ Date: _____

| | | | |
|---|--|--------------------------------------|--|
| PART II: CAREER/COLLEGE PLANS | | | |
| <i>The Salem Scholarship Awards are applied toward tuition and fees for institutions of higher learning. Please answer the following questions with respect to your career/college plans. If you are currently enrolled in a program, please simply answer all questions in terms of your current status.</i> | | | |
| To which institutions have you applied? <i>(List in order of preference)</i> | 1 st Choice | | |
| | 2 nd Choice | | |
| | 3 rd Choice | | |
| Indicate the type of institution: | <input type="checkbox"/> 2 year - Associates <input type="checkbox"/> 4 year – Bachelors <input type="checkbox"/> Graduate School (MBA, Other (Specify): _____) <input type="checkbox"/> Seminary <input type="checkbox"/> Technical <input type="checkbox"/> Nursing <input type="checkbox"/> Other (Specify): | | |
| Have you received a letter of acceptance, rolling admission and/or other commitment? | <input type="checkbox"/> Yes - Specify: _____ <input type="checkbox"/> No | | |
| List anticipated enrollment date: | | | |
| List your course of study (major/minor), if known at this time, or you may note undeclared: | | | |
| State your attendance plans: | <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | No. of credits/courses per semester? | |



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| PART III: CHURCH ACTIVITIES | |
| List any church activities in which you have participated in the last four years: | |
| List any church leadership roles you have held in the past four years: | |

| | | | |
|--|--|------------------|-------------------|
| PART IV: EMPLOYMENT HISTORY | | | |
| <i>Please provide information on your work experiences over the last four years (including summer employment). Begin with the current or most recent position.</i> | | | |
| Position I | | | |
| Name of Employer | | | |
| Job Title | | Employment Dates | __/__/__ to _____ |
| Job Description | | | |
| Position II | | | |
| Name of Employer | | | |
| Job Title | | Employment Dates | __/__/__ to _____ |
| Job Description | | | |
| Position III | | | |
| Name of Employer | | | |
| Job Title | | Employment Dates | __/__/__ to _____ |
| Job Description | | | |



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PART V: EXTRA CURRICULAR INVOLVEMENT

Please list any academic extra-curricular activities, community involvement positions and/or leadership roles you have held, as well as any honors and awards you have received over the last four years.

| Activity/Club/Honor | |
|---------------------|--|
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PART VI: COMMUNITY SERVICE

Please briefly describe your community service/service-learning experiences and accomplishments.

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PART VII: THOUGHTFUL APPLICATION

Carefully read each of the following statements and questions.

Please answer the first question and one of the other choices for a total of two responses.

*Provide a detailed and thoughtful answer to each question in a well-developed paragraph. Your responses should be **TYPED** and submitted on a separate sheet of paper with the completed application.*

1. MANDATORY QUESTION

Describe your education and/or career plans, including intended major and career aspirations. What have been the major factors that have influenced your decision?

2. OPTIONAL QUESTION – Select one question from the following options.

(For each, consider all your church, employment, academic, personal or community activities and/or experiences, as well as any leadership roles you have held and honors or awards you have received)

- a) Which of these activities or experiences has most facilitated your personal growth? Explain why.
- b) What would you say is your greatest accomplishment or the achievement of which you are most proud? Explain why.
- c) What would you say has been your greatest challenge or obstacle? Explain why, as well as how you dealt with this challenge/obstacle.



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| PART VIII: FINANCIAL FACTORS | |
|--|---|
| <p><i>Please answer the following questions to give insight into your financial situation. Please note that financial need will be considered, along with other criteria for scholarship awards, although it is not the primary consideration. Candidates are encouraged to state any special circumstance regarding financial need.</i></p> | |
| State the anticipated costs for the school of your choice: | Tuition: |
| | Room and Board <i>(if applicable):</i> |
| | Books and Other Fees: |
| What are your housing arrangements? | <input type="checkbox"/> On Campus (<i>Dormitory</i>) <input type="checkbox"/> Off Campus (<i>Specify</i>): _____ <input type="checkbox"/> Living with family <input type="checkbox"/> Living on own (<i>Specify</i>): _____ |
| How many other members of your family will pursue post-secondary education at the same time you are in school? | |
| Please list any other grants, scholarships or benefit programs for which you have applied. Indicated if you have been awarded a scholarship as well as the amount awarded. | |
| | |
| Are there any additional special financial circumstances that should be considered? | |

See the next two pages for the forms you should give to the two people you ask to provide recommendations.

Be sure that you explain that they should return the signed forms and their letters to you in a sealed envelope so that you may include them in the application packet you submit by April 15.



SALEM SCHOLARSHIP AWARDS PROGRAM – RECOMMENDATION FORM

To Whom It May Concern:

Thank you for your willingness to provide a letter of recommendation for the applicant. Your response will be treated with strict confidentiality.

The Scholarship Awards Program of Salem Evangelical Lutheran Church in Catonsville, Maryland, considers the following criteria in the award of scholarships:

- Academic Achievement (excellence in effort and performance)
- Christian Character, Service and Citizenship (including participation and/or leadership in activities in church, school and/or the community)
- Educational and Career Goals
- Financial Need (taken into account with the other factors, although it is not the primary consideration).

In your letter, please indicate how long and in what capacity you have known the applicant. Additionally, we ask that you provide a statement about the applicant that speaks to your evaluation of his/her abilities and qualities based on the aforementioned criteria. Please restrict your comments to no more than a single page.

Please complete the bottom section of this form. Enclose it and your letter of recommendation in a sealed envelope and sign your name across the seal. Please give this envelope to the applicant, so he/she may submit this with the other submission materials for evaluation. **Please note all evaluation materials must be submitted to the church office by April 15.**

Date: _____

Name of Applicant: _____

Name of Reference: _____

Signature of Reference: _____

Preferred Contact Method (telephone or e-mail address): _____



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