

## Scholarship for Lutheran laywomen

### Application Checklist

The application process is completed when:

- the following forms have been mailed directly to Women of the ELCA by the writers:
  - Complete application**
  - Transcript--** *(If attended school in the last three years a transcript is needed; if applicant has been out of school more than three years, disregard this requirement.)*
  - Pastor's Reference Form--** *(If the pastor is a relative, request a reference from the chairperson or vice-chairperson of the congregation.)*
  - Academic Reference Form--** *(A letter of recommendation from a faculty member who has taught the applicant within the last three years; disregard if out of school more than three years.)*
  - Personal Reference Form--** *(A letter from someone who has knowledge of the applicant's potential.)*

### The ELCA College and Seminary Leadership opportunity only

- the following forms have been mailed directly to Women of the ELCA by the writer:
  - President's Letter--** *from the president of your institution nominating you for the scholarship (this letter is to evaluate your potential for advancement to a senior leadership position in higher education and state how you will use what you have learned upon your return)*
  - Complete application**
  - Letter of Recommendation--** *from the dean or department chair, or a supervisor*
  - Admission Letter--** *(a written confirmation of admission to the institute or program you are attending.)*

**Email all application materials to:**

Women of the ELCA Scholarship Program

**Women.ELCA@elca.org**

**Subject line: Scholarship (Name of Applicant)**

Mailing address: 8765 W. Higgins Road, Chicago, IL 60631-4101

**Applications and supporting documents must be emailed or mailed (with postmark) to Women of the ELCA no later than Feb. 15, 2020. There are no exceptions.**

# Scholarship for Lutheran laywomen

## General Information

Please provide mailing address, phone and email address that you check frequently during the scholarship process

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

Address: \_\_\_\_\_

City, state, ZIP: \_\_\_\_\_

Phone number: day \_\_\_\_\_ evening \_\_\_\_\_

Email address: \_\_\_\_\_

Age: \_\_\_\_\_

United States citizen  Yes  No

Name of your ELCA congregation: \_\_\_\_\_

Congregation city and state: \_\_\_\_\_

My congregation has a Women ELCA unit?  Yes  No

Name of synod: \_\_\_\_\_ Region number and letter: \_\_\_\_\_

Have you previously received a Women of the ELCA scholarship?  Yes  No

If yes, what year? \_\_\_\_\_ Amount: \$ \_\_\_\_\_

## Optional Information

Providing this information will help the organization gather better statistic about those applying for scholarships. If applying specifically for the **Women of Color leaders** opportunity the Ethnicity information **must be checked**.

Ethnicity:  African Descent-- (Black, African Caribbean, African American, African Nationals)  American Indian and Alaska Native  Arab and Middle Eastern  Asian and Pacific Islander  Caucasian  Latino  Other

Marital Status:  Single  Married  Widowed  Divorced  Separated

Ages of **dependent** children: \_\_\_\_\_

**Historical Information**

Please provide educational history starting beginning with high school and work history beginning with most recent position.

**Education**

List schools attended, starting with high school.

<u>Institution</u>	<u>Diploma/Degree</u>	<u>Dates Attended</u>

**Professional or Occupational Background**

List most recent position first.

<u>Position</u>	<u>Dates of employment</u>	<u>Reason for Leaving</u>

**Application Information**

Providing this information is essential to the application process. Please provide as much accurate information as possible. Note: This is an academic and needs based scholarship based on a full-time academic school year unless otherwise noted. If applying specifically for the **Administrative Leadership** or **ELCA college and seminary leadership** opportunity skip "Course of study" and complete "Program" lines.

**Proposed Studies – Program for this application**

Name of university or institution: \_\_\_\_\_

City and state: \_\_\_\_\_

Course of study: \_\_\_\_\_

Starting date: \_\_\_\_\_ Expected graduation date: \_\_\_\_\_

Program: \_\_\_\_\_

Starting date: \_\_\_\_\_ Expected completion date: \_\_\_\_\_

Include 2020–2021 anticipated academic expenses **Financial**

**Information**

Program costs (in detail) Tuition: \$ \_\_\_\_\_ Books: \$ \_\_\_\_\_ Supplies: \$ \_\_\_\_\_

Amount requested from Women of the ELCA: \$ \_\_\_\_\_

**Written Response**

As a consideration to our scholarship committee, please type your responses on a separate page using a common font, such as Times New Roman or Book Antigua, no smaller than 11 point. Also please limit your response to one page total.

If applying specifically for the **ELCA college and seminary leadership\*** opportunity please answer question 6 and 7 only.

1. What are your career goals?
2. How will this course of study advance your career goals?
3. How are you involved in Women of the ELCA (unit, synodical women's organization and churchwide Women of the ELCA)?
4. How will this course of study impact your involvement in Women of the ELCA and community?
5. Why should Women of the ELCA invest in you?

If applying specifically for the **ELCA college and seminary leadership\*** opportunity please answer questions 6 and 7. Also please limit these responses to one page total.

6. What are your expectations from participation in this program-institute?
7. How will you be able to implement your management institute experience at your academic institution?