Christ Our Savior Lutheran High School Scholarship

Application Form

PLEASE PRINT. THANK YOU! IF YOU NEED ADDITIONAL SPACE, YOU MAY ATTACH A SEPARATE SHEET OF PAPER.

Student's Name:			Gender	
First	Middle	Last		
Iome Address:				
Street Number	Street Name	City	State	Zip
Iome phone number ()		Parent Cell Number ()		
chool currently attending:				
School nar	me	City	State	Zip
Tame of teacher to be used as reference:		Name of Pastor		
	ee:			
. ACADEMICS		Test Name:		
Areas of Excellence ACADEMICS Composite Score in normed per High School GPA: What do you consider to be you	centile rank:	Test Name:	Cı	
. ACADEMICS Composite Score in normed per High School GPA: What do you consider to be you	rcentile rank: ur strongest subject?		Cı	
. ACADEMICS Composite Score in normed per High School GPA: What do you consider to be you Please attach a copy from the	rcentile rank: ur strongest subject?		Cı	
. ACADEMICS Composite Score in normed per High School GPA: What do you consider to be you Please attach a copy from the ACTIVITIES AND CLUBS Please list or describe activities	r strongest subject?		Cu	umulative
. ACADEMICS Composite Score in normed per High School GPA: What do you consider to be you Please attach a copy from the	r strongest subject?	r report cards.	Cu	umulative

3. AWARDS, ACCOMPLISHMENTS, POSITIONS OF LEADERSHIP
Please list or describe any awards that you have received.
Please list or describe any special accomplishments.
Please list or describe any leadership positions you have held.
4. SERVICE TO CHURCH, SCHOOL, OR COMMUNITY
Please list or describe any servant events or projects in which you have participated. For each, list the date(s) and the
specific role you played or work you did.
5. In 300 words or less, please describe the most memorable service opportunity that you have participated in, including your role.

Please explain why you should receive this award.	

Return application, report cards, and two letters of reference to Christ Our Savior Lutheran High School by April 30.

810 Soldiers Way, Evansville, IL 62242

Phone: 618-853-7300

Fax: 618-853-7361

www.coslhs.org