

# APPLICATION FOR CONTINUED GRANTS

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

Home address: \_\_\_\_\_

School address: \_\_\_\_\_

I will be starting semester: \_\_\_\_\_ at: (School) \_\_\_\_\_

My major(s) or field of interest is: \_\_\_\_\_

My current career or life goal is: \_\_\_\_\_

My family's employment and financial situation is similar to my original application. **YES/NO**  
(Please circle, detail significant changes as indicated by a NO response.)

My anticipated costs for academic year (example 2014-2015): \_\_\_\_\_

Housing (room/board): \_\_\_\_\_

Tuition: \_\_\_\_\_

Associated costs: \_\_\_\_\_ (detail): \_\_\_\_\_

**Total:** \_\_\_\_\_

I **did/did not** (circle) have a part or full time job last school year – include on campus work-study.

I **did/did not** (circle) have a full or part time summer job. At: \_\_\_\_\_

I expect to contribute about \$ \_\_\_\_\_ to my education expenses next year from non-scholarship or financial aid sources.

Call, Equip and Send ..... are not necessarily sequential – what aspect of the mission statement of Trinity did you find impacted your life last academic year?

**(please attach your brief response on a separate page)**

***I understand that my complete application includes a copy of my FAFSA (Free Application for Student Aid), financial statement from my school, or other proof of matriculation before any award from the Trinity Lutheran Church Endowment Fund for Education is released for my use:***

\_\_\_\_\_  
(Signature)

Date: \_\_\_\_\_