

Brenda Thornhill Nichols Memorial Scholarship Application
Lutheran Church of Our Saviour

The Brenda Thornhill Nichols Memorial Scholarship Fund

The criteria for awarding this scholarship are:

- + First priority is for a member of LCOS pursuing a degree in nursing or a Master of Divinity degree for ordination into the Gospel ministry.
- + Second priority is for a student studying at a two or four-year college, university, trade or technical school.
- + Scholarship may be awarded to the same student in more than one year.
- + One or more awards may be made at the discretion of the Scholarship Committee.
- + Active Participation in worship and church activities will be emphasized in the Committee's deliberations.

Section 1. Applicant Information

Name: _____

First

Middle

Last

Address _____

City _____ State ____ Zip _____

Telephone _____

Social Security # _____ - _____ - _____

Place of Birth _____

E-mail _____

Date of Birth _____ Age _____

Section 2. Family Information (TO BE COMPLETED BY DEPENDENT CHILDREN ONLY)

Name of Parent(s)/Guardian _____

Father's Employment _____

Address _____

City _____ State ____ Zip _____

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Mother's Employment _____

Address _____

City _____ State ____ Zip _____

Brothers/Sisters Name _____ Age _____

Section 3. Beginning with the ninth grade, list all schools or colleges which you have attended

Name of Institution	Address	Dates
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Date or expected date of high school graduation _____

Class rank if currently in high school

_____ Top 10% _____ 20%-50% _____ 10% to 20% _____ below 50%

Grade point average _____

Schools to which you plan to apply for admission:

Name	Address	State
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What is the highest level of education you plan to complete beyond high school?

Check all that apply:

___ Specialized training or certificate program ___ Two-year associate degree

___ Bachelor's degree ___ Master's degree (university or seminary) ___ Doctoral or related degree

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Church and community activities

Organization	Years of Participation	Office Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section 6. TO BE COMPLETED BY ALL APPLICANTS

Academic honors or recognition

Non-scholastic or community awards (including athletics or special achievements)

Section 7. Financial Assistance

List Financial Aid for which you have applied

List Financial Aid awarded to date

Source	Amount
_____	_____
_____	_____
_____	_____

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Section 8. Employment Record

Employer	Dates of Employment
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Section 9. In 400 typed words or less, please respond to each of the following essay questions:

1. What are your goals and plans for your future? How important is a scholarship from LCOS in accomplishing these goals and plans?
2. Identify a personal experience you had which influenced your life and the development of at least one value for you. Share how your faith or values changed as a result of this experience.

Please return to the following address:

**Scholarship Committee
Lutheran Church of Our Saviour
9601 Hull Street Road
North Chesterfield, VA 23236**

If you have any questions, please call the church office at 804-276-4271
or email Pastor Katie at PastorKatie@LCOSVA.org.

I understand if I am awarded a scholarship, the funds will be sent to the school in which I enroll and must be used to offset costs for tuition, room, and/or board. If I withdraw from school I will request the scholarship be refunded to Lutheran Church of Our Saviour in accordance with the school refund policy.

Signature

Date