Edward W. Albertin Living Memorial Endowment Student Scholarship Application Form

The purpose of this endowment fund is to assist members of St. Paul Lutheran Church, Sheboygan Falls, WI in the pursuit of full-time careers within the church. Students must pursue a degree through a LCMS institution.*

Applicant Name:				
Home Address:				
Phone: Work	Home: Cell:			
Email Address:				
Place of birth:	Date of birth:			
Name of the institution at which you v	wish to pursue your	degree:		
(Name)	(City)			(State)
Toward what degree will you be work	ing?			
Colleges and universities attended, in your current institution first. <i>D</i>	_	-	_	-
Colleges / University & State Located	Inclusive Dates of Attendance	Degree	Date Awarded or Expected	Major Field of Specialization

Mail completed form to: Jim Albertin, 3913 Broadway Rd., Sheboygan Falls, WI 53085

^{*} Students who pursue a career outside of church work after graduation are asked to pay back to the Edward W. Albertin Living Memorial Endowment and grants they have received.