

**SHELLS EVANGELICAL LUTHERAN CHURCH
HIGHER EDUCATIONAL GRANT PROGRAM
STUDENT APPLICATION FORM**

THIS FORM MUST BE RECEIVED BY THE FINANCE COMMITTEE
no later than the first Sunday in December.

NAME _____

HOME MAILING ADDRESS _____

INSTITUTION WHERE YOU ARE ATTENDING:

NAME _____

SCHOOL ADDRESS _____

PROGRAM OF STUDY _____

YEAR OF EXPECTED GRADUATION _____

Check One: FULL-TIME _____ PART-TIME _____

MONTH AND YEAR YOU BEGAN YOUR HIGHER EDUCATION _____

Student's Signature

YOU CAN NOT BE CONSIDERED FOR A GRANT UNLESS YOU COMPLETE
AND RETURN THIS APPLICATION FORM TO:

**SHELLS LUTHERAN CHURCH
287 Shells Church Road
Grantville, PA 17028**

Attn: Finance Committee