

# THE KOHN-HUTTER LUTHERAN STUDENT SCHOLARSHIP FUND

1. Name: \_\_\_\_\_  
(last, first, middle)

2. Address while in school: \_\_\_\_\_  
Street Apt.

\_\_\_\_\_ City State Zip Code

3. Permanent Home Address: \_\_\_\_\_  
Street Apt.

\_\_\_\_\_ City State Zip Code

4. Email Address: \_\_\_\_\_

5. Social Security Number: \_\_\_\_\_

6. Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

7. Name of Lutheran Church where you are a member: \_\_\_\_\_

Address of Church: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

8. Academic Rank:  
 \*Freshman     Sophomore     Junior     Senior    GPA: \_\_\_\_\_

*\* If incoming Freshman, provide:*

Name of High School: \_\_\_\_\_

High School Class Rank: \_\_\_\_\_

SAT scores: Math: \_\_\_\_\_ Verbal: \_\_\_\_\_ Total: \_\_\_\_\_

ACT Scores: \_\_\_\_\_ & Attach High School Transcript

9. Degree Sought: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_ - \_\_\_\_\_

10. Is this application based on financial need?     Yes     No

11. Occupation of Father: \_\_\_\_\_

Employer: \_\_\_\_\_

No. years employed: \_\_\_\_\_

Address: \_\_\_\_\_

Tel. # \_\_\_\_\_ Annual Salary: \_\_\_\_\_

12. Occupation of Mother: \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 No. years employed: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Tel. # \_\_\_\_\_ Annual Salary: \_\_\_\_\_
13. Number in household dependent on stated salary: \_\_\_\_\_
14. Applicant's estimated annual college expenses: \$ \_\_\_\_\_
15. a) Percentage of college cost for which parents will be responsible: \_\_\_\_\_  
 b) Percentage of college cost for which student will be responsible: \_\_\_\_\_

**Please use a separate sheet of paper to answer questions 16-19.**

16. Anticipated additional scholarship/loan funds (list source and amount).
17. Describe your career goals and what you hope to accomplish over the next 10 years.
18. List any honors or achievements received (indicate year received).
19. List any high school, college, or civic activities/organizations in which you have been involved. Include office or title held, calendar year involved, and amount of time spent – if applicable (i.e. weekly, monthly, annually).
20. Submit a letter from the Pastor of your Lutheran Church certifying that you are a member of the Lutheran Church and stating how long you have been a member.
21. Submit two current letters of recommendation from individuals who know you well.
22. Submit current transcript.

**Authorization**

I certify to the best of my knowledge, that the information contained in this application is correct and complete. I agree that JP Morgan Chase Bank, Trustee, has my permission to verify the information contained herein. I also acknowledge that scholarships will be granted by a Committee of the Trustee to Lutheran students attending The University of Texas at Austin.

Signed: \_\_\_\_\_  
Student's signature Date

**All applications must be fully completed and returned to:**

Lutheran Campus Ministry  
 University Lutheran Center  
 2100 San Antonio  
 Austin, Texas 78705-5522  
 (512) 472-5461