



ABIDING SAVIOR MEMORIAL SCHOLARSHIPS SCHOLARSHIP APPLICATION INSTRUCTIONS

General Scholarship Information

By direction of the Church Council, a Scholarship Committee was formed in 1990 to develop and oversee the application process and to award scholarships each year. Scholarships are available to high school seniors who have been accepted to a college, university, community or technical college or to persons of any age enrolled in a seminary program.

- The Abiding Savior Lutheran Church Scholarship was originally made possible by the funds from a memorial donation and now continues from member donations and our Abiding Savior Endowment Fund.
- The Brian Peter Hansen Memorial Scholarship was originally made possible by the funds from the Hansen family and continues with love from others.
- The Rob Cox Memorial Scholarship was made possible by funds from the family and friends of Rob Cox, son of Tonya & Gary Cox, in loving memory of Rob.

The Scholarship Committee will review all applications, conduct any interviews that may be necessary, and select recipients. If no suitable applications are received, the Scholarship Committee may opt not to award any scholarships in the current year, or only award partial scholarship amounts.

Priority will be given to the applicants who are:

- ☐ Present or previous members of Abiding Savior or have some current involvement with Abiding Savior Lutheran Church
- ☐ Are pursuing education that relates to religious-related vocations (i.e. ministry, youth work, mission emphasis, etc.) or will be attending a Christian-based school
- ☐ Currently experiencing extenuating circumstances or financial hardship

Application Instructions

1. Obtain an application packet from the church office (Hard copy or electronic PDF version available)
2. Complete **all information as instructed**. Be sure to include verification, letters of recommendation, etc., as indicated.
3. Return application to the church office by **10am on Sunday, May 31, 2026**. You can drop it off, mail it in or send an electronic copy by email to office@abidingsavior.org. Once the office has received your application, you will receive a confirmation to let you know that it was received.
4. The Scholarship Committee will conduct its review of applications shortly thereafter and will contact applicants as needed for further information.
5. Final decision and award of any scholarship money will occur **Sunday, June 14, 2026** during worship.

ABIDING SAVIOR LUTHERAN CHURCH
SCHOLARSHIP APPLICATION FORM

Abiding Savior Lutheran Church
8211 Red Oak Drive
Mounds View, MN, 55112
www.abidingsavior.org | office@abidingsavior.org | 763-784-5120

BACKGROUND INFORMATION

Name: _____

Phone: _____

Address: _____

A. Are you presently a member of Abiding Savior? Yes ☐ No ☐
If not, were you previously a member? Yes ☐ No ☐ Dates _____

B. Were you baptized at Abiding Savior? Yes ☐ No ☐ Date _____
If not, where were you baptized? _____

C. Were you confirmed at Abiding Savior? Yes ☐ No ☐ Date _____
If not, where were you confirmed? _____

D. Immediate family/ other relatives who are members of Abiding Savior?
(please specify relationship)

EDUCATION

High School Name: _____

Graduation Date: _____

Additional Schooling/PSEO: _____
(College/Tech): _____

Extracurricular Activities (Music, Clubs, Athletics, etc.): _____

ABIDING SAVIOR INVOLVEMENT

In what ways have you been involved at Abiding Savior? (Music, Sunday School helper, VBS, Mission Trips, Youth trips, etc.)

OTHER ACTIVITIES

Volunteer activities, Community Service, Other:

Employment (if applicable):

<u>Employer</u>	<u>Address</u>	<u>Dates of Employment</u>

POST HIGH SCHOOL EDUCATION | FUTURE PLANS

List College/Educational Institution that you plan to attend and address:

Major/Focus of Study:

OTHER INFORMATION

Is there any other information you would like to share with the Scholarship Committee? (Example: awards/honors, special family circumstances, other life experiences, financial hardships, health, etc.)

PERSONAL STATEMENT

Answer the following questions in a personal statement that is to be completed on a separate document and submitted with this application. **Please respond carefully as your personal statement is of high priority in the evaluation process.**

- ☐ How has ASLC shaped your life?
- ☐ Who are the people who have impacted your faith and how have they influenced you?
- ☐ What is unique about you? (Talents, gifts, abilities, etc.)
- ☐ Where do you see yourself in five years?

REFERENCE LETTER

Please attach at least one letter of recommendation. This can be from a teacher, pastor, youth leader, employer or other important, non-related adult.

Thank you for your interest and best wishes on your next big adventure in life!