



Elizabeth Kreiser Weisburger Scholarship

4406 Georgia Ave NW, Washington, DC 20011 | LSSNCA.org
HaineS@LSSNCA.org | (202) 723-3000 x. 138

APPLICATION

Lutheran Social Services of the National Capital Area (LSS/NCA) administers the Elizabeth Kreiser Weisburger Scholarship. The LSSNCA website LSSNCA.org offers guidance in completing your materials, samples of responses, and other competition information. This form must be completed by the student and received in the LSS/NCA office no later than **Tuesday, July 25, 2017**. Mail to: LSS/NCA Attn: Susan Haine, 4406 Georgia Ave NW, Washington, DC 20011.

I, _____ have read and understand the conditions of the Elizabeth Kreiser Weisburger Scholarship. I affirm that I am a Qualified Candidate as defined in this application. I give permission to officials of my institution to release transcripts of my academic record and other information requested for consideration in the Scholarship program. I understand that this application will be available only to qualified people who will review it in the course of their duties. I waive the right to access letters of recommendation written on my behalf.

If selected for a Elizabeth Kreiser Weisburger Scholarship, I agree to attend the LSS/NCA Orientation Day and Awards Ceremony in Washington, DC and will annually communicate with LSS/NCA as agent for Dr. Weisburger to report on my studies.

I affirm that all of this application is my own work. I affirm the information contained herein is true and accurate to the best of my knowledge and belief.

Date _____ Signature _____

Applicant Legal name in full (Print/Type)

Last Name: _____ First Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Home ☐ Mobile ☐ Other ☐

E-mail address: _____

Date of Birth (Month Day, Year): _____

FULL NAME: _____

I am **Qualified Candidate** because:

☐ I am either a US citizen or a non-US citizen who is NOT on a published "Specifically Designated Nationals" terrorism watch list.

☐ I am a client of a Lutheran Social Ministry organization in the ELCA Metro DC Synod (check applicable organization).

- ☐ Community Family Life Services
- ☐ Fellowship Square Foundation
- ☐ Good Shepherd Housing Foundation
- ☐ Lutheran Social Services of the National Capital Area
- ☐ N Street Village
- ☐ National Lutheran Communities and Services
- ☐ Northern Virginia Coalition (NOVACO)
- ☐ Southeast Ministry
- ☐ Housing Up

I understand that any individual who qualifies by virtue of relationship with a Lutheran Social Ministry organization must be nominated by the organization. To be nominated please submit this application to that organization for review.

Have you previously received the Weisburger Scholarship or any other scholarship from LSSNCA? ☐ YES ☐ NO If so, when? _____

Please answer the questions below.

Education: Current or most recent educational institution:

Location (Address): _____

Dates Attended: From _____ To _____

Program: _____
(High School, Associate's Degree, Baccalaureate, Vocational/Certificate, Graduate Degree)

Attach copy of the academic records of the most recent school terms. If you are unable to attach a copy of academic records please provide a brief explanation.

FULL NAME: _____

2. Activities. List college and high school activities (student government, sports, publications, etc.). List in descending order of significance. You will have space for four school activities.

Activity (1): _____

Dates: _____ Offices: _____

Activity (2): _____

Dates: _____ Offices: _____

Activity (3): _____

Dates: _____ Offices: _____

Activity (4): _____

Dates: _____ Offices: _____

3. Community Service Activities. List up to 4 public service and community activities (homeless services, work with religious organizations, etc.). Do not repeat items listed previously.

Activity (1): _____

Role: _____

Dates: _____ # of Weeks Active: _____

Activity (2): _____

Role: _____

Dates: _____ # of Weeks Active: _____

Activity (3): _____

Role: _____

Dates: _____ # of Weeks Active: _____

FULL NAME: _____

Activity (4): _____

Role: _____

Dates: _____ # of Weeks Active: _____

4. Employment. List part-time and full-time jobs and internships over the past 6 years.

Type of Work/Role	Employer	Dates	Number of Hours/Wk

5. Awards. List any awards, scholarships, or special recognitions you have received.

FULL NAME: _____

6. Achievements. Describe a recent particularly satisfying achievement or activity (do not repeat experience described elsewhere). (The writer of your recommendation letter must confirm this experience.)

7. Proposed Study. What goal do you hope to achieve through the educational study that you plan to use the scholarship funds for?

8. Anticipated Success. Describe why you believe you will be successful in the program you have selected?

FULL NAME: _____

9. Goal of Education. What do you hope to do in the future and what position do you hope to have upon completing your studies?

10. Additional Information. What additional personal information do you wish to share with the LSS/NCA Scholarship Committee for consideration in awarding the Elizabeth Kreiser Weisburger Scholarship?

Lutheran Social Services of the National Capital Area prohibits discrimination against individuals on the basis of race, color, sex, sexual orientation, gender identity, religion, disability, age, genetic information, veteran status, or national or ethnic origin in the administration of its scholarship programs.