



# Hope Lutheran Church

## Theological Education Fund

### Grant Request Form

Requesting Person \_\_\_\_\_ Date of Request \_\_\_\_\_

Residence Address \_\_\_\_\_

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

Mailing Address (if different) \_\_\_\_\_

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

Telephone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Bachelor's Degree Education Institution \_\_\_\_\_

Theological/Training Institution Applying To \_\_\_\_\_

Mailing Address: Street \_\_\_\_\_

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

Web Site Address \_\_\_\_\_

Have you been accepted? Y / N Please circle

Proposed Area of Study \_\_\_\_\_ Degree or Certificate Sought \_\_\_\_\_

How will the funds be used? Add additional sheets if necessary \_\_\_\_\_

\_\_\_\_\_

Amount Requested \_\_\_\_\_ Date Distribution Needed \_\_\_\_\_

Additional Documentation Attached? Y/N

Committee Notes: Hope Lutheran Church use only

For Committee: Approved / Not Approved Date \_\_\_\_\_

Reason \_\_\_\_\_

Date Notification Sent \_\_\_\_\_ By \_\_\_\_\_