

**MELVIN AND ANNABEL BIRKELBACH SCHOLARSHIP FUND
SCHOLARSHIP APPLICATION 2018-2019**

ST. PETER LUTHERAN CHURCH
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Georgetown, Texas 78626
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APPLICANT'S NAME: _____
FIRST M.I. LAST

HOME ADDRESS: _____

ADDRESS WHILE AT COLLEGE: _____

STUDENT I.D. NUMBER <or> SOCIAL SECURITY NUMBER: _____

PHONE: (____) _____ ALTERNATE: (____) _____

E-MAIL: _____

I HEREBY REQUEST THE AWARD BE ISSUED ON MY BEHALF TO:

NAME OF INSTITUTION: _____

REGISTRAR'S ADDRESS: _____

PHONE: (____) _____ E-MAIL: _____

Please indicate which school term these funds will be applied to:

_____ Fall Semester _____ Spring Semester
_____ Other (explain): _____
_____ Summer Semester If so, _____ 1st Session or _____ 2nd Session

SIGNATURE

DATE