## Cornerstone Lutheran Church Guidelines for Scholarships Lutheran High School of Indianapolis

Cornerstone Lutheran Church is a member congregation of the Greater Indianapolis Association for Lutheran Secondary Education (Lutheran High School of Indianapolis). It is the policy of Cornerstone Lutheran Church to award scholarships to disciples of the congregation who attend Lutheran High School of Indianapolis.

- All applications for scholarship assistance for the succeeding school year must be received in the church office **by June 30** and must be on the *Cornerstone Lutheran Church Application for Lutheran High School of Indianapolis Scholarship* form. Forms are available in the church office and available for download from the church website.
- An application shall be effective for one school year. A new application must be made for subsequent years.
- The scholarship committee will review applications. The committee will consist of an Outreach Team member, Board of Education Team member and one of the pastors.
- The recommendations of the scholarship committee will be presented to the Governing Board.
- It is our intention that scholarship amounts will be no less than \$1,000 per semester per student for those approved for scholarships, with total yearly contribution being a minimum of \$2,000. Amounts awarded may vary depending on the financial situation of Cornerstone Lutheran Church. Scholarship funds will be paid directly to Lutheran High School by August 1 for the 1st semester and by January 1 for the 2nd semester.
- Contributions to the scholarship fund come primarily from the Outreach

Team budget is determined by the Governing Board and Voter's Assembly. Additional funds may come from the congregation disciples or other sources.



Submit completed application by June 30 for the upcoming school year in one of the following ways:

- 1. Preferred method: Email form as attachment to info@cornerstonelutheran.church
- 2. Mail form to Cornerstone Lutheran Church, Attn: Outreach Team, 4850 E. Main St, Carmel IN 46033

	Submitted by parent/guardian			(signature)		
. PERSONAL INFORMATION						
. Name of student:(last)			(first)		(middle)	
(last)			(IIISt)		(middle)	
2. Name of student: (last)			(first)		(middle)	
Home Address:						
(street)			(city)	(state)	(zip)	
Home Phone:						
Parents' Names:						
Parents' Email Address:						
Parents' Address, if different from above:						
I. EDUCATION						
Grade for succeeding school year–Student 1:	9 <sup>th</sup>	10 <sup>th</sup>	1	1 <sup>th</sup>	12 <sup>th</sup>	
Grade for succeeding school year–Student 2:	9 <sup>th</sup>	10 <sup>th</sup>	1	1 <sup>th</sup>	12 <sup>th</sup>	
Current school of attendance:						