

**THE JANKE FAMILY TRUST EDUCATIONAL SCHOLARSHIP  
APPLICATION FORM**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

**CONTACT INFORMATION**

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Please give a summary of your involvement at Trinity Lutheran Church**

**Please describe any involvement in community activities and/or service organizations.**

**Please provide any other information you feel should be considered in your application for this scholarship.**

Date submitted \_\_\_\_\_

Attach additional sheet as necessary.