

# Shepherd Scholarship

Shepherd of the Valley Lutheran Church recognizes that the cost of higher education may be an obstacle for many in our congregation who have the desire to continue their education. This scholarship is funded by the General Benevolence Fund at SOTV.

This scholarship is open to congregation members who **thoroughly** complete an application, who are **currently** enrolled in or are **planning** to enroll in post-secondary education/training. Applicants must be on track to have a high school diploma or GED before secondary education begins in the fall. Students may reapply annually.

## Confidentiality

The scholarship application review process is confidential. **Applicants will need to attach a copy of: 1** - their high school or most current transcript (unofficial is sufficient) that has their cumulative GPA on it, **2** - a copy of the front page of the Student Aid Report, which indicates Expected Family Contribution from their FAFSA application. (make sure that the copy of the FAFSA form has your full name listed on it). **3** -copy of their ACT/SAT results for verification (if taken, not a requirement for applying). **4** – Essay.

The cover page of the scholarship application with identifying information, transcript, ACT/SAT score, and student aid report will be removed prior to review by the Scholarship Committee and a number will be assigned to each application. **Please be sure not to use personal identifying information on the application or essay.**

*It is NOT the job of SOTV to make sure you have all the documents attached.* Be sure to **attach ALL necessary documents requested.** The committee reviews all applications as submitted. You will be contacted only if information needs to be clarified, and not as a reminder to complete or attach missing information. Missing information on your application will affect how the application will be evaluated.

The Scholarship Committee looks at a variety of information gathered from the application to get a well-rounded view of the applicant. They look at the financial assistance the scholarship could provide, the involvement in the church, their academic record, well rounded involvement in activities, etc. **All information, with the exception of your contact information, will be shredded after the committee meets.**

## Applications available

Scholarship applications are available on February 1, 2025 at the Welcome Center in the church narthex or online at <https://www.sotv.org/shepherd-scholarship/>

## Review Process

The committee uses a blind process when evaluating the applications. One person accepts, answers questions about any application, and compiles all the applications. This person also goes through the applications making sure they are free of identifying material, copies them and has them ready for the committee to review. All applications are evaluated on the same scale by all the members of the committee. Afterward they meet to determine who will be awarded scholarships based on the evaluations. The committee is made up of members of SOTV who have different backgrounds. We endeavor to have a good sample from the congregation.

## Awards

The Scholarship Committee will be awarding 1-3 scholarships with a minimum award of \$1000. Award notification letters will be sent by May 17, 2025. All awards will be made by July 31, 2025 and sent directly to the school where the student is enrolled.

## Application deadline

**Thursday, March 20, 2025-** Applications must be postmarked or dropped off at the Shepherd of the Valley Lutheran Church Welcome Center or CYF Office by **Thursday, March 20, 2025 at 3 PM**, Attention: Linda Nelson (Linda is not on the evaluation committee). **ANY APPLICATIONS THAT ARE NOT POSTMARKED OR RECEIVED BY THE DEADLINE WILL NOT BE CONSIDERED FOR AN AWARD.**

# Shepherd Scholarship

Please use **BLACK OR BLUE INK** to fill out application. Please define any acronyms that you use on this application.

Application number \_\_\_\_\_

Church member since (year) \_\_\_\_\_ HS graduation year \_\_\_\_\_

Current School \_\_\_\_\_ Expected graduation \_\_\_\_\_

Current GPA \_\_\_\_\_ ACT/SAT \_\_\_\_\_

## Post High School Plans

List the college or post high school institution that you will attend. If you are undecided, list your first three choices in order of preference. Please include Room and Board in the cost of tuition.

	Yearly Cost to Attend
1. _____	
2. _____	
3. _____	

Intended major or field of study \_\_\_\_\_  
 Career goal \_\_\_\_\_

## Shepherd of the Valley Involvement: (attach additional page if more space is needed)

Please list all church activities, including church camp and mission trips, that you are/have been involved in while a member at Shepherd of the Valley Lutheran Church. Check the grade(s) you were involved. *If attending a Post-Secondary school, be sure to add any church activities at your local church community.*

Do you attend worship regularly (2 or more times a month)? \_\_\_\_ Yes \_\_\_\_ No

Did you attend GodZone? \_\_\_\_ Yes \_\_\_\_ No

Did you attend Confirmation? \_\_\_\_ Yes \_\_\_\_ No Please use the area below to list other activities at SOTV

Activity	Post Sec.								Est. Yearly Hrs	Leadership Roles/Comments
	9	10	11	12	1	2	3	4		


**Extracurricular Activities:** (attach additional page if more space is needed)

Please list your involvement in all volunteer/community service experiences, internships, and extracurricular activities through your school and community (not anything at SOTV, that is above) in grades 9 to present (this includes any college clubs and jobs). Check the grade(s) you were involved.

Activity	Post Sec.								Est. Yearly Hrs	Leadership Roles/Comments
	9	10	11	12	1	2	3	4		

**Work Experience:** (attach additional page if more space is needed)

Please list any paid work experience, including places of employment, dates worked and a brief description of duties. Mark N/A if none to report at this time.

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**Financial Need Considerations**

Is your family helping you pay or meet expenses while you are in school?  Yes  No

Please specifically explain how your parents will help you meet your expenses? (ex. My parents will pay 1/3 of my tuition; my parents will be giving me \$3000 per year, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Aide Index (SAI) number from FAFSA form \_\_\_\_\_

How do you plan to meet expenses which cannot be met by help from your family?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please name any scholarships or grants (not loans) you have been awarded (include the monetary value and length of the award as well). If you are waiting to hear about either a package from a school or other scholarships, please include that as well.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please give a brief explanation if any of the following are applicable: (attach an extra sheet if needed)

- Number of siblings in college \_\_\_\_\_
- Extraordinary medical expenses \_\_\_\_\_
- Parent's loss of job \_\_\_\_\_
- Family extenuating circumstances \_\_\_\_\_
- Other \_\_\_\_\_

**Essay**

Write a brief **one page**, (using 12-14 sized font and 1.5 spacing) typed essay addressing the following question. Do **NOT** use personal identifiers, such as name, when writing the essay.

*Describe an experience that has solidified your connection to faith, whether as a part of SOTV or not.*

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**Thursday, March 20, 2025 by 3 pm:** Applications must be postmarked or dropped off at the Welcome Center or CYF Office in Shepherd of the Valley Lutheran Church by Thursday, March 20, 2025 at 3 PM. *Attention Linda Nelson.* (Linda is not a member of the evaluation committee). ANY APPLICATIONS THAT ARE NOT POSTMARKED OR RECEIVED BY THE DEADLINE WILL NOT BE CONSIDERED FOR AN AWARD.

**May 17, 2025:** Applicants will be notified of award status by this date.

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Name \_\_\_\_\_

Home Phone number \_\_\_\_\_ Cell Phone number \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Email address \_\_\_\_\_

\*Please star the best way to reach you (phone number or email).

## Application Checklist

**All applications are reviewed as submitted.** You will NOT be contacted to provide missing information. Please be sure to include the following:

- Application form -- **all areas filled out thoroughly**
- Copy of unofficial transcript that includes your **Cumulative GPA**
- Copy of front page only of FAFSA Student Aid Report with Expected Family Contribution (EFC) number (make sure this is for the most current year, 2025-2026 and it identifies you)
- Copy of verification of their ACT/SAT score showing their name
- Essay
- Mail or drop off your application at the Welcome Center or CYF Office by 3 PM on March 20, 2025 to:

Shepherd of the Valley Lutheran Church  
Attention: Linda Nelson  
12650 Johnny Cake Ridge Road  
Apple Valley, MN 55124

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Office use only: Date received \_\_\_\_\_ Application number \_\_\_\_\_