

Millie Carlson Scholarship Application

Name: _____

Home Address: _____

E-Mail Address: _____

Telephone Number: _____

Parents' Names: _____

Parents' Addresses: _____

Date of High School Graduation: _____ Grade Point Average _____

Application to/acceptance at what college or university: _____

After college hopes and plans: _____

Share comments about your involvement, participation, and service at Augustana.

Share your comments about how you have "lived out" your Confirmation promises to serve family, school, and community these past four years:

Explain why receiving this scholarship is important to you. (You may include additional information on the back). _____

Applicant's signature _____ Date _____