

John R. and Ann C. Raschke Endowment Fund Application

Please fill out and send to St. John's Lutheran Church. Applicants will be contacted by the Board of Elders for an interview.

Date: _____

Name: _____

Date of Birth: _____ Marital Status: _____ Single _____ Married

Male/Female: _____

Home Address: _____

Phone number: _____

Email: _____

Name and address of Institution for which Funds will be distributed:

Major: _____

Career Objective: _____

I [] plan to enroll.

I [] have enrolled.

I [] am attending full time.

I [] am attending part time.

Entrance date: _____

Anticipated date of program completion: _____

I certify the information is true and correct to the best of my knowledge. I understand that the monies received are a gift and do not need to be repaid. Annually, transcripts are required to be submitted to the endowment committee for review. A "C" average or above is mandatory to continue receiving monies.

Signature of Applicant: _____

Please send your application to: St. John's Lutheran Church, 8948 North 1900th Avenue, Geneseo, IL

churchoffice@stjohnsgeneseo.org.