

BETHEL LUTHERAN CHURCH
ENDOWMENT FOUNDATION
312 Wisconsin Avenue
Madison, WI 53703

The Cephas Johnson Seminary Scholarship
Application Form (for tuition only)*

***Must be received by Bethel Lutheran Church by April 15 of the year you are attending Fall Semester**

In signing this application (at the bottom) you are certifying that:

- You have been accepted at the indicated ELCA seminary below on an ordination track;*
- You are a resident of Dane County;*
- You are a member of the indicated ELCA church below and it is located in Dane County;*
- You are enclosing (1) a recommendation from your pastor, and*
- (2) a recommendation from the Congregation/Church Council of your church.*

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

E-mail: _____

Home Congregation: _____

Address: _____

Academic Year: _____ Year at Seminary 1 2 3

Seminary you are/will be attending to become ordained: _____

Seminary address: _____

Costs of tuition only per semester: Fall _____ Spring _____
(Grants for summer school, J-Term or additional clinic work will not be considered)

Credits taking per semester: Fall _____ Spring _____

Other scholarships/financial aid and amount: _____
(Please specify what applies to tuition)

Briefly state your inspiration for wanting to become an ordained minister:

*Signed: _____