Stevens Seminary Foundation Scholarship Application for Former GSL Graduates Enrolling in College of Education *

APPLICANT DATA		
NAME: LAST	FIRST	MIDDLE INITIAL
MAILING ADDRESS:		
CITY:	MN ZIP CODE:	
PHONE:	EMAIL ADDRESS:	
DATE OF BIRTH: MONTH	DAY	YEAR
GLENCOE-SILVER LAKE GRADUATION	YEAR	
PARENTS' NAMES		
<u>TRANSCRIPT DATA (Application will no college of education enclosed)</u> WORK EXPERIENCE: (Since graduation from		iscript and proof of admittance to a
POST SECONDARY SCHOOL DATA: Nam	e of post- Secondary School for which	financial aid is requested
School	City/State	
GOALS IN FIELD OF EDUCATION Why have you decided to go into the field of e elementary, middle school, English, etc.) Whe		rant to teach and which subject area? (i.e.

*Once completed this application needs to be sent to Michele Mackenthun 13966 125th Street, Glencoe, MN 55336 with college transcript and proof of admittance to college of education enclosed.