

Albert W. Van Duzer Scholarship Fund Application

Please type or print

NAME OF APPLICANT: _____

ADDRESS: _____

PHONE: _____

HOME CONGREGATION: _____ CITY: _____

NAME OF CLERGY: _____

CLERGY SIGNATURE AND DATE: _____

NAME OF HIGH SCHOOL: _____ CITY: _____

GRADUATION DATE: _____

NAME OF COLLEGE/UNIVERSITY: _____

CITY/STATE: _____

Staple completed activities sheet and student essay to this form before mailing.

Completed packets **must** be postmarked by March 1, 2008.

Any documents sent under separate cover must also be postmarked by that date.