

**Inter-Lutheran Coordinating Committee for Ministries in Chaplaincy, Pastoral
Counseling and Clinical Education "Give Something Back" Scholarship
Financial Data Form**

The "Give Something Back" endowment fund was initiated in 1992 with funds donated by ministries of chaplaincy, pastoral counseling and clinical education, and by others who are supportive of these ministries. In 2003, Lutheran Chaplaincy Auxiliary of St. Paul, Minnesota contributed their assets to the endowment and as a way of continuing their eighty-year support of chaplaincy ministry. Ongoing gifts to the fund serve as an opportunity to give back in gratitude for the blessings that have been received from education and service in specialized ministries.

The endowment makes a limited number of financial awards available to individuals seeking ecclesiastical endorsement and certification/credential in ministries of chaplaincy, pastoral counseling and clinical education.

Anticipated expenses for the clinical education year 20__ to 20 __:

Combined Household Income	_____	for 12 months
Housing (Rent/Mortgage)	_____	for 12 months
Utilities (Gas, Electricity, Phone, Water, Trash)	_____	for 12 months
Food	_____	for 12 months
Transportation (Gas, Car Repairs, Bus, Car Loan)	_____	for 12 months
Medical/Dental (Medicine, Office Visits, etc.)	_____ per month,	_____ for 12 months
Insurance (Car, Health, Life, Homeowners, Rental)	_____ per month,	_____ for 12 months
Church/Charity	_____ per month,	_____ for 12 months
Self-Care	_____ per month,	_____ for 12 months
Loans/Credit Cards	_____ per month,	_____ for 12 months
Tuition	_____ per month,	_____ for 12 months
Supervision Costs and Professional Expenses	_____ per month,	_____ for 12 months
Taxes	_____ per month,	_____ for 12 months
Other	_____ per month,	_____ for 12 months
Totals	_____ per month,	_____ for 12 months

Please indicate anticipated scholarship/grant income from sources other than the "Give Something Back" Scholarship: _____ per month, _____ for 12 months.

Number and ages of dependents: _____

Additional information the scholarship committee should know regarding your finances:

Amount Requested \$ _____

(Signature)

(Date)