

THE EPISCOPAL DIOCESE OF BETHLEHEM
GRESSLE SCHOLARSHIP FUND APPLICATION

Student's Name: _____

Address: _____

Telephone: () _____ Email: _____

Parish: _____

Name and Place of College Attending: _____

_____ Year of Graduation: _____

College Costs: Tuition \$ _____

Room \$ _____

Board \$ _____

Total \$ _____

Please list other financial aid anticipated: _____

Clergy's Name: _____

Spouse's Name: _____

Spouse's Employer: _____

Gross Annual Income (before taxes and deductions):

Clergy: \$ _____

Spouse: \$ _____

Other (list sources): \$ _____

\$ _____

\$ _____

Total Annual Family Income: \$ _____

Type of Housing (Please check one) Cash Housing: _____ Rectory: _____

