



# JOHANNE LOHSE BEQUEST

## APPLICATION CHECKLIST

2024 ACADEMIC YEAR

Office Manager  
Church Property Trustees  
Box 4438  
Christchurch 8140

[cptofficemanager@anglicanlife.org.nz](mailto:cptofficemanager@anglicanlife.org.nz)

Attached is my application for a LOHSE SCHOLARSHIP, I have included the following:

	Please Check
Application Form	<input type="checkbox"/>
Agreement of Candidate (Signed)	<input type="checkbox"/>
Statement re Clergy Stipend (Please provide a copy of last pay slip)	<input type="checkbox"/>
Copy of Birth Certificate	<input type="checkbox"/>
Copy of Baptism Certificate	<input type="checkbox"/>
Testimonial from _____	<input type="checkbox"/>
Testimonial from _____	<input type="checkbox"/>
Testimonial from _____	<input type="checkbox"/>

NAME IN FULL: \_\_\_\_\_

DIOCESE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

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Email Address \_\_\_\_\_

Telephone: [ ] \_\_\_\_\_

### **Office Use Only**

**Date Received:**

**Notes:**