

Application for Student Financial Assistance
Pastoral Leadership Commission
Great Lakes Conference
 For Conference Year - July 1, _____ to June 30, _____

Name _____

Mailing Address _____

Email Address _____

Marital Status _____ Number of Other Dependents _____

School of Attendance _____

Program/Degree _____

Membership in which Great Lakes Conference Church _____

Monthly Household Expenses:

Tithe _____

Housing _____

Utilities _____

Food _____

Insurance _____

Loan Payments _____

Taxes _____

Auto Maintenance _____

Specify Other _____

TOTAL _____

Anticipated Monthly Income:

Salary (Self) _____

Salary (Spouse) _____

Interest Income _____

Other Income _____

TOTAL _____

Anticipated Aid/Gifts (Annually)

General Conf _____

Congregation _____

School _____

Other _____

TOTAL _____

Each Conference Year the Pastoral Leadership Commission will review applications for financial aid from those students that have been approved for such aid by the Council. The student will be responsible to submit to the Council a transcript of completed hours following each trimester/semester and payment will be made to the school/student based upon this information.

"I will honor the policies adopted by the Pastoral Leadership Commission and the Great Lakes Conference concerning financial assistance. Acceptance of financial assistance from the Great Lakes Conference demonstrates my commitment to full-time vocational ministry within the Great Lakes Conference or other approved ministry by the Commission."

Signature _____ Date _____

PLEASE RETURN THIS FORM TO: Great Lakes Administrator
 P.O. Box 1132, Findlay, OH 45839-1132