

**Ministerial Education Fund (MEF) Seminary Education Grant
Application**

The Michigan Conference of the United Methodist Church

Part 1 (To be completed by applicant.)

Today's Date _____

Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Email Address _____

Phone _____ Certifying District _____

Part 2 (To be completed by Seminary Registrar.)

The above named student is enrolled at _____

Carrying _____ hours of classes for the _____ term.

School Seal

Signature of Seminary Registrar

Printed Name

Part 3 (To be completed by the Seminary Financial Aid Officer.)

From the above-named student's completed FAFSA or similar report, he/she has available resources from family, personal assets/investments, employment, scholarships, loans and grants (other than from this source) the amount of \$ _____ for this 9-month academic year, 20____. This student's budget for this same period is \$ _____. He/she has a projected deficit/surplus of \$ _____.

Financial Aid Officer Signature

Printed Name

Phone Number

Email

Pay to the Order of _____

Mailing Address _____

Please return to: Susan Hitts
(231) 622-3839
missburlake@aol.com