Seminary Student Loan APPLICATION FOR FINANCIAL ASSISTANCE IN-MI Mennonite Conference Leadership Enhancement Team

Naı	me		Date of birth	
Naı	me of	f spouse (if married)	Date of birth	
E-n	nail: _			
Ho	me ad	ddress		
Ho	me co	ongregation	Member for how long	
Co	ngreg	gation now serving	How long	
Scł	hool ı	now attending		
		address		
1.	Des	cribe your plan with regard to pastoral ministr	y or other church-related service to which you feel called	
2.	. Do you plan to complete your training at the above mentioned school? If not, where would you transfer and when?			
3.	Describe your proposed course of study including the number of credit hours to be taken. For example, MDiv, MRE, CPE, etc.			
4.	What is your anticipated completion date of your training?			
5.	What responsibility do you presently have in the church, and what assignment will be involved in your training?			
6.	Des	cribe the nature of your financial need:		
	(a)	Tuition cost		
	(b)	Living expenses		
	(c)	Earnings (if married, include spouse's)		
	(d)	Other source(s) of income (grants, loans, et	c.)	

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		grant permission to the Leadership Enhancement Team to check your financial statement at the
	seminary	office?
8.	Names a	and ages of children:
9.	Any addi decision.	tional comments that would be helpful to the Leadership Enhancement Team in making their
10.	Amount a	applied for \$
Sig	ned	
Dat	:e	
		IN-MI Mennonite Conference 109 E. Clinton St., Suite 100 Goshen, IN 46528

For LET Use Only

Date received _____

Date approved ____

Amount granted \$____