Seminary Student Grant Request Form: General and Minority

Board of Ministry
East Ohio Conference
United Methodist Church

1st half	2nd half	Minority	Minority		
_____	_____	_____	_____	_____	amt
_____	_____	_____	_____	_____	date
_____	_____	_____	_____	_____	app

for committee use only

Please type or print

1. Name (Last/First/M.I.)_____

2. Address (Street) _____

   (City/State/Zip) _____

3. Phone _____e-mail _____Sex: M F NB

4. East Ohio District Committee on Ministry with which you are currently affiliated:

   _____

5. Highest Conference relationship: Certified candidate _____Other _____

6. Educational institution in which you are enrolled: _____

7. Degree program _____ Anticipated completion date _____

8. Full time _____ Part time _____

9. Ethnic minority: African American ____ Asian ____ Hispanic ___ Other _____ (specify)

10. In which Conference will you seek membership? _____

11. Are you seeking ordination as Elder _____ Deacon _____ not yet determined _____

12. Home church _____

Signed _____ Date _____

Please ask the Financial Aid Officer where you are enrolled to complete this section:

Name of student_____

Does student have undergraduate degree from accredited college or university?_____

Is student enrolled full-time? _____

Is student's present academic record satisfactory?_____

Do you recommend this student for a grant from East Ohio Conference?_____

Signature_____ Title_____

Office phone_____

Keep a photocopy for your records. Return this form to:
The Grants and Scholarships Person listed on the EOC website
www.eocumc.org

For more information call or email the person listed on the website