

Seminary Student Grant Request Form: General and Minority

Board of Ordained Ministry	1 st half	2 nd half	Minority	Minority		
East Ohio Conference	_____	_____	_____	_____	_____	amt
United Methodist Church	_____	_____	_____	_____	_____	date
	_____	_____	_____	_____	_____	app

Please type or print _____ for committee use only

1. Name (Last/First/M.I.) _____
 2. Address (Street) _____
(City/State/Zip) _____
 3. Phone _____ e-mail _____ Sex: M F
 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:

Brian Sheetz, briandsheetz@gmail.com

Please use "BOM Seminary Grant" as the email subject

For more information call 800-499-3972 ext. 152