

STUDENT REQUEST FOR FINANCIAL AID FROM CONGREGATION

2009 - 2010 Academic Year

Please complete this form and return it to the Financial Aid Office. Once you are admitted, a letter requesting financial assistance will be sent to the congregation from the Seminary Relations Office of Luther Seminary.

STUDENT NAME _____

Address _____

City, state, zip _____ Telephone # _____

What degree program are you enrolled in? _____

Year of study 2009-2010 _____ (*first, second, etc.*)

How many additional years do you expect to request funds from this congregation? _____

Have you received tuition support from this congregation in the past? _____

Are you married? _____ Number of children who live with you? _____

Classes per term:

_____ Fall semester _____ Interim (J-Term)

_____ Spring semester

PLEASE NOTE: *The letter of request can be written only for students with 1.5 or more courses per semester.*

Congregation or church which is to receive the letter. (Address must be complete)

Congregation _____

Street Address _____

City / State / Zip _____

Pastor(s) _____

Please relate information describing your relationship with the congregation. (*Baptism, confirmation, attendance, activity, employment, etc.*)

Student Signature _____ Date _____

OFFICE USE ONLY

YES / NO Admitted

ON / OFF Campus

_____ LETTER SENT