

# **Financial Aid**

## Application for 2016-17 Academic Year

### We look forward to helping with your pursuit of financial assistance for your theological studies.

Please complete *all* items on this application before submitting it to our Office of Financial Aid. Any items left blank are likely to delay processing of aid. In addition to this document, you are required to file the 2016-17 Free Application for Federal Student Aid, which can be accessed at www.fafsa.ed.gov.

Questions? Please contact the Office of Financial Aid at 740-362-3373 or finaid@mtso.edu.

Name	Date of birth		
Mailing address			
Email			
2016-17 academic program(s):	M.Div. 🗆 M		S
2016-17 academic class: 🛛 1st ye	ar 🛛 2nd ye	ar 🗅 3rd year 🛛 Ez	xpected graduation date (month/year)/
Where will you live the greatest p On-campus apartment or re	-	-	-
How many credit hours do you an List <i>only</i> credit hours that are earned degree won't count for financial aid	ed as part of you	r degree program. Credit h	ours taken that don't count as part of your current
Summer Term 2016 Fal	l Semester 20	16 January Term	2017 Spring Semester 2017
1, 2016, and June 30, 2017. Be sur	e to include y pport from yo	ourself, as well as your ou and/or your spouse).	nd/or your spouse will support between July spouse and dependent children (if they will Also include people who now live with you spouse.
FULL NAME	AGE	RELATIONSHIP TO STUDENT	NAME OF COLLEGE OR GRAD SCHOOL (if attending half-time or more)
EXAMPLE: John Q. Student	25	Self	MTSO
			Continued

#### If you are United Methodist...

What is your annual conference? \_\_\_\_\_

Are you in the candidacy process?  $\hfill \Box$  Yes  $\hfill \Box$  No

If yes, what stage?  $\Box$  Inquiring  $\ \Box$  Beginning  $\ \Box$  Declaring  $\ \Box$  Certified

List below all possible sources of outside assistance you expect to receive for the 2016-17 academic year. List each source for which you have applied or plan to apply, whether it is confirmed or unconfirmed at this time.

	AMOUNT	NAME OF SOURCE (be specific)
Denominational support If United Methodist, include conference name	\$	
General Board of Higher Education & Ministry	\$	
Eastern Star	\$	
Veterans' program	\$	
Other gifts	\$	
Loans	\$	
What is your total education loan indebtednes If you are unsure, you can look it up at www.nslds.ed.gov/nslds		

## **Statement of Certification**

I understand that the Free Application for Federal Student Aid (FAFSA) must be filed by the priority deadline of April 1.

I understand that financial assistance is granted on the basis of financial eligibility and that any changes in expenses, resources or enrollment status must be reported to the Office of Financial Aid. These changes may result in a revision of the amount of assistance I receive or a request for repayment of funds received. I understand that I must meet all federal eligibility requirements in order to receive federal financial aid.

I certify that the information provided on this application is true to the best of my knowledge and any changes in this information will be reported, in writing, to the Office of Financial Aid.

Student signature

Printed name

Date

**Please note:** This form must be printed and signed by hand.

Thank you for your careful completion of this application. Please mail or deliver it to the following address:

Office of Financial Aid Methodist Theological School in Ohio 3081 Columbus Pike Delaware, OH 43015