## APPLICATION FOR CLASSICAL AID FUNDS

Insert Classis contact information here.

Please complete every section of this form that pertains to you. Incomplete applications will be returned. **Deadline for receipt of all information is MARCH 1.** 

| Name  |  |                     |                        |                                    |                        |                               |
|---|--|---------------------|------------------------|------------------------------------|------------------------|-------------------------------|
| Address   |  |                     |                        |                                    |                        |                               |
| City, State, Zip  |  |                     |                        |                                    |                        |                               |
| Phone Number  |  |                     | Emai                   | mail Address                       |                        |                               |
| Marital Status<br>Children (list name                                       | •  | ⊐Married            | □Divorced              | □Separated                         | I □Widowed             | I                             |
| Anticipated Enrol<br>Summer 2017<br>Fall 2017<br>Spring 2018<br>Summer 2018 | □Full Time/Not<br>□Full Time/Not<br>□Full Time/Not | Sure □1/2 Sure □1/2 | Time □Les<br>Time □Les | s than Half Tim<br>s than Half Tim |                        | ot Attending<br>ot Attending  |
| Year in Seminary<br>□First Year   | □Second Year                                       | r                   | □Third Year            | - □Fou                             | urth Year              | □Other                        |
| What Seminary a   | re you attendin                                    | g?                  |                        |                                    |                        |                               |
| Which degree wil<br>□Master of Divinity                                     |  |                     |                        | Theological S                      | tudies □M              | laster of Theology            |
| For what type of r □Ordained ministry □Ordained ministry □Other (please ex  | y in the CRCNA<br>y in another den                 |                     | □Theologica            | al education                       | □Church E<br>□Missions | Education<br>in North America |
| Christian Reformed for candidacy for m                                      |  |                     |                        | ams: The Lor<br>s □No              | d willing, do          | you intend to apply           |
| STUDENT INCOME  | : The following                                    | information         | is included in         | order to calc                      | ulate financia         | al need.                      |
| What was your a   | djusted gross inco                                 | ome for 2016        | ? \$                   |                                    |                        |                               |
| What was your sp  | oouse's adjusted (                                 | gross income        | e for 2016?            | \$                                 |                        |                               |
| What is the net w   | orth of you and yo                                 | our spouse's        | current investr        | ments? \$                          |                        |                               |

| Student Resources                                   | :  |   |
|---|--|---|
| Savings/Mone  | ey from Work:  |   |
| Institutional S                                     | cholarships:   |   |
| Family Suppo  | ort:   |   |
| Other Suppor  | t:   |   |
| TOTAL STUDENT F                                     | RESOURCES: \$  |   |
| financial need.                                     | the official Estimated Cost of A<br>onal expenses you would like ι | attendance published by the school to determine us to consider?   |
| assistance, we request t                            | hat you disclose your current debt in                              | planning for seminary. In order to provide the best council and formation. The information provided about indebtedness is intended students and to provide financial advice if necessary. |
| Credit Card Debt<br>Name of Credit Card             | Total Amount Owed  | Monthly Payments  |
| Loans for Automobiles<br>Creditor (holder of the lo |  | Monthly Payments  |
| Mortgages<br>Creditor (holder of the lo             | an) Total Amount Owed  | Monthly Payments  |
| Other Indebtedness (Po                              | ersonal, Family, Banks, Credit Uni                                 | ions, etc.)   |
| Student Signature                                   |  | Date  |