SOUTHWESTERN UNIVERSITY

2018-19
United Methodist Beneficiary Grant Scholarship Application

Application Deadlines:
March 15, 2018 (prospective students)
May 1, 2018 (currently enrolled SU students)

Southwestern University Beneficiary Grants are given to the dependent child of an ordained minister of the United Methodist Church, who is an ordained minister under appointment, is retired, or is deceased. Recipients must meet all of the requirements for admission to Southwestern University and are required to maintain satisfactory academic progress (as defined by the University) in order to maintain eligibility. This award is only for full-time undergraduate study at Southwestern University. Recipients must be enrolled and degree-seeking at Southwestern University and may not have earned a bachelor's degree at Southwestern University or elsewhere. This award may not be used for summer school. Recipients may receive this award for a maximum of eight semesters.

Return the completed application to:
Southwestern University Financial Aid Office, PO Box 770, Georgetown, TX 78627
Phone: 512-863-1259 Fax: 512-863-1507

Applicant Information

Student Name: _____
Last Name First Name SU ID#

Address: _____
Street *City* *State* *Zip*

Intended Major: _____

Name of Minister Parent: _____

Church Affiliation

Church Name: _____

Church Address: _____
Street *City* *State* *Zip*

Annual Conference: _____

Applicant Signature: _____ **Date:** _____

Minister Parent's Signature: _____ **Date:** _____

Certification of Pastoral Employment

(To be completed by the Deacon's or Elder's District Superintendent or Bishop)

Clergy Status: _____Appointed Elder _____Employed Deacon
_____Retired Elder _____Retired Deacon _____Deceased Elder or Deacon

I hereby certify that _____, parent of the above named applicant, is actively
(Name of parent minister)
employed in full time ministry through the authority of the _____Annual Conference of the United
(Annual Conference)
Methodist Church, or that the parent is now on incapacity leave or deceased and was in good standing with the Conference at the time of incapacitation or death.

_____ _____
Signature of District Superintendent or Bishop who supervises parent's appointment, employment and/or conference status — Title

_____ _____
Address — Date