

# CHURCH WORK EDUCATION ASSISTANCE GRANT APPLICATION

*High School, University or Seminary in a Synodical School*

Southwest Missouri Circuit Mission Council, Missouri District, Lutheran Church--Missouri Synod

Name \_\_\_\_\_ Parents \_\_\_\_\_

Address \_\_\_\_\_

Congregation, City \_\_\_\_\_

School \_\_\_\_\_ Academic Goal \_\_\_\_\_

1. The applicants must be responsible members of a congregation belonging to the Southwest Circuit, MO Dist., LCMS.
2. All applications must carry the signatures of the applicant's pastor, and two officers of the congregation. It is assumed that this application is being made because there is a financial need for its benefits.
3. Preference will be given to applications made in the following order: candidates for the pastoral ministry, candidates for the teaching ministries of the church, lastly candidates desiring to become deaconesses, DCE's, Youth workers, Lay Ministers, etc.
4. All applications should be in the hands of the President of the Mission Council three weeks prior to the meeting. Regular meetings are held on the third Mondays of February and July.
5. Grants approved by the Mission Council will be to offset educational expenses, and will be dispersed to the appropriate Synodical school during: a) the second quarter or semester of the school year for first-year students and b) during the first quarter or semester for students who have completed at least one year of study. The amount of each grant will be determined by the Mission Council based on the funds available.
6. Students receiving grants who discontinue their studies are asked as soon as possible to return the assistance given so that others may be helped. Students who upon completion of their studies enter a ministry of the church and serve for 2 years will not be under any obligation to return grant monies credited to them.
7. The assistance review board of the Circuit Mission Council will consist of the Circuit Counselor, and the President, Vice President, Secretary, and Treasurer of the Council. All applications will be subject to review at a regular meeting of the Mission Council.

## **ASSISTANCE CONTRACT**

As a responsible member of the above indicated congregation, I, the undersigned, do on the date of \_\_\_\_\_ apply to the Mission Council of the Southwest Missouri Circuit of the Missouri District of the Lutheran Church--Missouri Synod for such financial assistance as the Council's resources enable it to provide me. It is my intention to prepare myself for:

\_\_\_\_\_ ministries of our Lutheran Church at: \_\_\_\_\_ Located at:

Signatures of applicant and of a (member) parent if under 18: \_\_\_\_\_

Birth Date \_\_\_\_\_ M / F; Special address: \_\_\_\_\_

We, the pastor and church officers of the above indicated congregation do hereby certify that the applicant for this grant is a responsible member of our congregation and will benefit educationally from the assistance able to be given.

Pastor \_\_\_\_\_

Church Officer \_\_\_\_\_ Position \_\_\_\_\_

Church Officer \_\_\_\_\_ Position \_\_\_\_\_

Circuit Mission Council (Approved \_\_\_ Denied \_\_\_)