

STUDENT LOAN REDUCTION GRANT APPLICATION

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

Name _____ Phone _____

Address _____

Congregation, City _____

Lender _____ Account Number _____

Lender Address _____

Amount Owed _____

1. The applicants must be serving as a professional church worker in a congregation or parochial school in the Southwest Circuit, MO Dist., LCMS, and a responsible member of a congregation in the Circuit.
2. Grants will cover only student loan debt incurred while studying for professional church work, excluding advanced degrees except Master of Divinity (M. Div.).
3. Grants will match what the applicant pays toward his or her loan reduction, up to \$1000 per year. Church worker must provide proof of debt reduction payment with this application.
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 dispersed directly to the lending institution.
6. 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 professional church worker serving 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 student loan debt reduction assistance as the Council's resources enable it to provide me.

Signature of applicant: _____ Date: _____

Position _____

Circuit Mission Council (Approved___ Denied___)