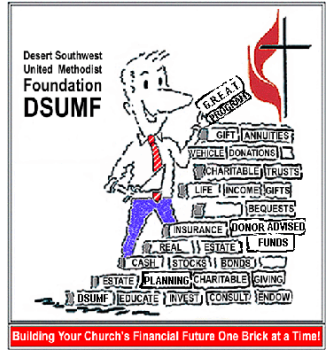


# DESERT SOUTHWEST UNITED METHODIST FOUNDATION STUDENT AID APPLICATION



**PLEASE PRINT LEGIBLY**

1. From what endowment fund(s) are you requesting aid? Check all that apply.

Lucille S. Bailey Fund  
  Charles S. Kendall Fund  
  James W. Mahood Fund  
  E.T. & W. A. McGaw Fund  
 Methodist Medical / Dental Student Loan Fund  
  George V. & Eva L. Steed Memorial Fund  
 Roger M. & Jane L. Stressman Fund

2. First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_

3. Street Address: \_\_\_\_\_

4. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. Primary Phone Number: (     )     -     6. Secondary Phone Number: (     )     -

7. Fax Number: (     )     -     8. E-Mail Address: \_\_\_\_\_ 9. Birth Date:     /     /

10. Member of What Local UM Church: \_\_\_\_\_

11. Name of Your Pastor: \_\_\_\_\_

12. Academic Rank Next Semester:  Freshman  Sophomore  Jr.  Sr.  Seminary  Graduate School

13. Academic Major:

14. What School Will You Attend Next Semester? \_\_\_\_\_

14A. Will You Be Attending School Full Time:  YES  No If no, Explain:

14B. Provide Us With Proof Of Your Enrollment For The Next Semester.

15. What Career(s) are you Considering?

16. List School-Related / Community / Church-Related Activities:  
(Attach Additional Sheet if Necessary)

17. Do You Have Siblings:  NO  YES, If Yes, How Many & What Ages?

18. What is Your Anticipated Total Cost (approximate) of Attending School per Year: (Tuition, Fees, Room & Board, Books, Transportation, etc.):

ALL OF THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS ACCURATE  
AND IS SUBJECT TO VERIFICATION BY DSUMF AT ITS DISCRETION.

19. Student's Signature: \_\_\_\_\_ Date:     /     /

**IN ADDITION TO COMPLETING THE APPLICATION, PROVIDING THE SIGNATURE REQUESTED ABOVE, AND PROVIDING PROOF OF ENROLLMENT FOR THE NEXT SEMESTER, YOU MUST:**

20.  Include two letters of reference, in sealed envelopes. Both letters *MUST* be on the reference's letterhead. One of the letters of reference *MUST* be from a Minister of your church and must be written on official church letterhead. The other letter of reference *CANNOT* be from a family member.

REFERENCE #1. :

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

REFERENCE #2.:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

21.  Include an OFFICIAL TRANSCRIPT from your most recent academic experience.

22.  Include and attach short, type-written, essay answers to the following questions on separate sheet(s) of paper:

- A. What are your financial needs; why are you applying for student aid?
- B. What are some of your immediate and long-term goals?
- C. Are you currently employed? If so, what are your responsibilities and will you work during the school year?
- D. If applying for aid from the Lucille Bailey Fund, and your need is of an emergency nature, then please explain your emergency.
- E. If applying for aid from Steed Fund, then describe your recent past, current and anticipated future non-ordained involvement in your church.
- F. If you are applying for funds to attend a University Senate-Approved Seminary or School of Religion, then you must also answer the following question: What is your plan for your ordained / licensed Christian Ministry?

**THE ENVELOPE YOU USE TO RETURN THE COMPLETED APPLICATION MUST INCLUDE:**

- The completed application form.
- Your short, type-written, essays,
- Two letters of reference in separate sealed envelopes, both on letterhead; one must be on official church letterhead.
- An Official Transcript
- Proof of enrollment in your college or university.
- Your return envelope must be postmarked no later than June 30<sup>th</sup> or December 31<sup>st</sup> for funding for the 1<sup>st</sup> or 2<sup>nd</sup> semesters respectively.

