

EXTERNAL STUDY GRANT APPLICATION GENERAL INFORMATION

The research doctoral program at Southern Seminary has a limited amount of funds available for off-campus doctoral study. In the past, grants have been awarded for travel expenses and classes necessary for doctoral research taken at other institutions.

In order to be considered for this grant:

- The applicant must complete the application.
- The applicant must demonstrate financial need (Part 2)
- The applicant must demonstrate that study for which the grant is sought is important to his or her program of study (Parts 3 & 4)
- The applicant must meet application deadlines.

Deadlines

Applications are processed twice annually. Please note the following deadlines:

May 15 – for late summer and fall grants (August 1- December 30)

November 15 – for spring and early summer grants (January 1 – July 31)

Application Process

- Complete the application.
- Submit Parts 1 and 2 to the Office of Financial Aid, Norton 150, or SBTS Box 2369, by the deadline.
- Submit Parts 3 and 4 to your Faculty Supervisor. The Faculty Supervisor will return this portion of the application to the Office of Financial Aid. The Faculty Supervisor should be given adequate time to review Part 3 and complete Part 4 before the deadline.

N.B. It is probably advisable to meet with your Faculty Supervisor to discuss your Application for the grant.

**EXTERNAL STUDY GRANT APPLICATION
PART 1**

Name _____ Phone _____

Campus ID _____ Social Security Number _____

Address _____

Area of Study _____

Marital Status _____ Spouse's name _____

Children (Names and Ages)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list colleges and universities attended, giving dates of attendance and degrees or certificates awarded. DO NOT SUBMIT ACADEMIC TRANSCRIPTS.

College/University Dates of Attendance Degree/Certificate

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please give names of churches of which you have been a member for the last three years.

Church Name Association City/State Date of Membership

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you previously received an External Study Grant?

If you have previously received an External Study Grant, when did you receive it and in what amount?

Requested Scholarship Amount \$ _____ **Date Money is needed** _____

**EXTERNAL STUDY GRANT APPLICATION
PART 2**

Indicate **net take home earnings** in item A.

- | | | |
|---|----------|----------|
| A. Name of your employer: _____ | \$ _____ | per year |
| Spouse's employer: _____ | \$ _____ | per year |
| Work reimbursements: _____ | \$ _____ | per year |
| B. Housing allowance or parsonage rental value
(if not included in salary) | \$ _____ | per year |
| C. Help from family/friends | \$ _____ | per year |
| D. Personal savings | \$ _____ | per year |
| E. Aid from churches | \$ _____ | per year |
| F. GI Veterans benefits | \$ _____ | per year |
| G. Keesee Fund grant | \$ _____ | per year |
| H. Outside Scholarships _____ | \$ _____ | per year |
| H. Other sources of income _____ | \$ _____ | per year |

Total annual financial resources \$ _____

If you have made applications for aid from any other sources than the seminary, state the sources and requested amounts.

FINANCIAL OBLIGATIONS:

Personal Expenses

School Related Expenses

Average non-educational monthly expenses

Estimated annual school expenses

- A. Rent/House payment _____
- B. Utilities _____
- C. Phone _____
- D. Food _____
- E. Contributions _____
- F. Clothing _____
- G. Auto payment/gas _____
- H. Travel expense _____
- I. Child Care _____
- J. Credit Card payment _____
- K. Insurance _____
- L. Other loan payments _____
- M. Other expenses, such as debt,
both long term and short term (please specify) _____

- Fall tuition & fee \$ _____
- Book Cost \$ _____
- Spring tuition & fee \$ _____
- Book Cost \$ _____

Total Annual School Exp. \$ _____

Total Annual Personal Expenses \$ _____

Total Annual Personal & School Related Expenses \$ _____

Describe any existing conditions that have caused unusual financial expenditures, such as family illness, dental conditions, monthly medications, disability, etc.

The information on this application is accurate to the best of my knowledge.

Signed _____ **Date** _____

Return Parts 1 and 2 to the Office of Financial Aid, Norton 150, or SBTS Box 2369.

EXTERNAL STUDY GRANT APPLICATION
PART 3

Part 3 is to be completed by the student and submitted to the faculty supervisor. Part 4 is to be completed by the faculty supervisor and returned to the Office of Financial Aid, Norton 150, or SBTS Box 2369.

Please give a detailed statement regarding how you plan to use the scholarship money and why the work is important to your study. (Attach additional explanation, if needed.)

Please include a detailed breakdown of anticipated expenses.

EXTERNAL STUDY GRANT APPLICATION
PART 4

Part 3 is to be completed by the student and submitted to the faculty supervisor. Part 4 is to be completed by the faculty supervisor and returned to the Office of Financial Aid, Norton 150, or SBTS Box 2369.

As the applicant's Faculty Supervisor, please offer any comments you believe would be helpful in evaluating this application, especially those related to the merits of the study for which the applicant is seeking the grant.

Please indicate how important you believe the work described above is for the student's program of study

1	2	3	4	5	6	7	8	9	10
No Importance									Absolutely Essential

Signed _____
(Faculty Supervisor)

(Date)

EXTERNAL STUDY GRANT APPLICATION
Rationale and Decision

Comments by the Office of Financial Aid:

Comments by the Associate Vice President of Doctoral Studies:

- Approval granted for External Study Grant in the amount of \$_____.
- Approval denied for External Study Grant.

Signed _____ (Date) _____
Associate Vice President for Doctoral Studies