

MDiv/MTS FINANCIAL AID FORM

PERSONAL INFO:

First Name: _____ Last Name: _____

Mailing Address: _____ City: _____
House/Unit number, Street

Province: _____ Postal Code: _____ Country: _____

Permanent Address: _____ City: _____
House/Unit number, Street

Province: _____ Postal Code: _____ Country: _____

Telephone: _____ E-mail: _____ Date of Birth: _____

Citizenship: Canadian or Permanent Resident Other: _____

Program of Study: MTS MDiv Year of Program: _____

Enrolling in: Full-time studies (7 or more half-courses) Part-time studies (6 or less half-courses)

Home or sponsoring diocese/church (if applicable):

PLEASE COMPLETE THIS SECTION APPLYING TO YOUR PERSONAL SITUATION

Spouse or Partner (including common-law)

Spouse's name: _____

Spouse's occupation: _____

Will spouse be contributing to education costs? Yes No

If Yes, please enter this amount in the Resources line "Parent/Spouse"

MDiv/MTS FINANCIAL AID FORM

Divorced/Separated/Single with dependants (18 years or less)

Number of dependants: _____ Ages: _____

Do dependants live with you? Yes, _____ % of time No

Single with no dependants

STUDENT'S DEBT LOAD

Accumulated Government Loans
(including this year) \$ _____

Accumulated Bank Loans
/Lines of Credit \$ _____

Outstanding Credit Card Balance \$ _____

Other Loans (please specify)

\$ _____

\$ _____

STUDENT'S ASSETS

Car, Motorcycle, etc.
Model: _____ Year: _____ \$ _____

Combined Value of stocks, bonds,
Trusts (excluding RRSP'S) \$ _____

Other Assets (please specify)

\$ _____

\$ _____

PLEASE LIST RECENT EMPLOYMENT OR VOLUNTEER ACTIVITIES WITH INSTITUTIONS/ ORGANIZATIONS:

Volunteer Activity or Employment	Dates
_____	_____
_____	_____
_____	_____
_____	_____

MDiv/MTS FINANCIAL AID FORM

BUDGET

- The budget is for the normal academic year running from September to April (8 months)
- **NEED** = Total Costs Minus Total Resources

EXPENSES	\$		TOTAL \$	RESOURCES	\$
Tuition & activity fees		X1		Savings (Not RRSP's) to be used towards education costs in this academic year.	
Books & supplies		X1		Parents/Spouse	
Rent per month/residence Room & Board/Residence only Mortgage payment		X8		Government income (CSST, Orphan's Benefits, Social Assistance, etc.	
Phone per month		X8		Relatives/friends	
Heat/Utilities per month		X8		Provincial loan	
Phone/utilities hookup charges		X1		Provincial grant	
Auto (gas, maintenance)		X8		Trust funds/investments cashed for use this year	
Groceries per week		X33		Part-time job (estimate)	
Clothing		X1		Work study bursary	
Laundry per month		X8		Other bursaries	
Personal Items per month		X8		Other (please specify)	
Loan/lease payments per month Specify loan/lease:		X8			
Recreation per week		X33			
Meals purchased elsewhere per week		X33			
Round-trip home (if commuting to London, state # of trips and distance)		X2			
Minimum credit card payment/month		X8			
Child care per month		X8			
Insurance cost per month		X8			
Other (specify)		X2			
TOTAL COSTS			\$	TOTAL RESOURCES	\$

NEED: \$ _____

MDiv/MTS FINANCIAL AID FORM

IF YOU DO NOT INTEND TO APPLY FOR GOVERNMENT FINANCIAL ASSISTANCE FOR YOUR STUDIES, PLEASE EXPLAIN WHY:

WHAT WILL YOU DO IF THE BURSARY COMMITTEE DOES NOT PROVIDE SUFFICIENT FUNDS?

WHAT STEPS, IF ANY, HAVE YOU TAKEN TO CONTROL YOUR DEBT LOAD?

HAVE YOU ENCOUNTERED ANY UNEXPECTED EXPENSES? (ILLNESS, DENTAL, PRESCRIPTIONS, FIRE, BREAK-IN, ETC.) BRIEFLY GIVE DETAILS:

DECLARATION

I certify that this application presents an accurate outline of my financial position. I am aware that should any inconsistencies in what I have reported come to light, I may be required to repay all or part of any award received.

Signature: _____ Date: _____

DUE MAY 31. Return to the Faculty of Theology at theology@huron.uwo.ca.