

Please estimate your anticipated Stevenson School for Ministry Costs

Tuition (for fall and spring semesters) \$ _____
Books and school supplies \$ _____
TOTAL ESTIMATED EXPENSES \$ _____

Please provide any other information

TOTAL ESTIMATED FINANCIAL ASSISTANCE needed \$ _____

Signed: _____ Date: _____

Approved by: _____

Date: _____

Applications should be submitted Three weeks prior to the start of the semester, for the first scholarship please **MEET WITH THE DEAN** or speak with the Dean **TO COMPLETE THIS Application PROCESS.**