GUIDELINES FOR AWARDING OF STUDENT FINANCIAL AID & DEBT REDUCTION — WYOMING DISTRICT

PURPOSE

The purpose of the Student Financial Aid fund is to provide scholarships for the men and women of the Wyoming District to train for full-time service in the Lutheran Church Missouri Synod (LCMS) and debt reduction assistance to rostered church workers of the LCMS.

OBJECTIVES

The objectives of Student Financial Aid are to cover five areas of needed assistance. The following five objectives detailed below are in a ranked order:

1) Scholarships

2) Education loan debt reduction for Wyoming District graduates (first tier)

3) To help cover the cost of prospective students looking into full-time Church work visiting a LCMS Seminary, University, College. Will cover the cost of registration and or travel at an official visitation of a LCMS Seminary, University or College, up to $500.00. This is for a one time visit to a college/University and a one time visit to a Seminary or attendance to Christ Academy per prospective Student.

4) Education loan debt reduction for graduates coming into the Wyoming District (second tier)

5) Support to any LCMS seminary, university, college or to Luther Classical College, as recommended by the CCS and approved by the Wyoming District Board of Directors.

SCHOLARSHIP GUIDELINES

1) Applicants will file the FAFSA Form (Free Application for Federal Student Aid.) which may be used to determine financial support. This FAFSA form may be obtained in an electronic version via the internet at www.fafsa.ed.gov.

2) Applicants must also complete the Wyoming District Application Form and Section 1 of the District Financial Aid Application — LCMS. These forms may be downloaded at wylcms.org.

3) Students who apply will receive a minimum amount of assistance per semester, regardless of need, the amount to be determined each year by the Commission of Congregational Services (CCS.)

4) Financial aid is available to all men and women attending a Synodically operated

seminary, university, college or Luther Classical College for the purpose of preparing for full-time service in the LCMS.

5) The application deadline for filing applications with the District shall be May 1. For those applicants contemplating their training to start in the second (2nd) semester, the deadline for filing applications with the District shall be October 1. Late applications will not normally be accepted, but they may be considered under extenuating circumstances.

6) Assistance is awarded for one school year at a time. A new application must be filed each year for which assistance is desired.

7) All applicants must be an active communicant member in a LCMS congregation within the Wyoming District. Exceptions may be granted in extenuating circumstances.

8) Students who receive assistance from the Wyoming District and transfer their membership to a parish in another District shall continue to receive such assistance to the close of the school year in which the transfer took place.

9) Financial assistance is not ordinarily awarded for summer school or during a students vicarage or internship.

10) Applications for assistance for post-graduate work shall be considered only in exceptional cases.

11) A student who discontinues or suspends his/her preparations for full-time service in the LCMS must immediately notify the Facilitator.

12) Each seminary student will be required to attend a "financial planning" event as provided by the seminary, and any expenses to the student may be covered by the district. For students attending a Synodical university or college, or Luther Classical College resources regarding proper financial management will be given.

13) **TAXES** All federal, state, and local taxes, including self employment taxes, and any other tax which may be imposed on any amount paid under this program shall be the sole responsibility of the worker.

PROCEDURE FOR MAKING SCHOLARSHIP APPLICATION

1) Complete the District Application Form and mail to the Facilitator of Student Aid before May 1. The District Application Form can be found at wylcms.org.

2) Sign and date a copy of the Guidelines for Awarding Student Financial Aid – Wyoming

District (below) and mail to the Facilitator of Student Aid.

3) The Wyoming District shall make payment of Wyoming District Financial Aid directly to the student to use for educational expenses while preparing for full time church work.
4) The student will generally be informed by the Facilitator as soon as he receives all pertinent information.

I certify that I have read the above guidelines and agree to the terms indicated.

Signature_____ **Date**_____

Adopted August 2023

WYOMING DISTRICT SCHOLARSHIP APPLICATION FORM

Please complete this form and return into the District Student Aid Facilitator by May 1 or sooner.

NAME _____ **DATE OF BIRTH** _____

MARITAL STATUS: Single _____ Married _____
    Wife or Husband's name: _____
    Number of children _____ Name/ages of children _____

HOME CONGREGATION: _____
    Congregation Address: _____
    Pastor: _____

ADDRESSES:
    Home: _____ E-mail: _____
    _____

    College or Seminary: _____ E-mail: _____
    _____

    Summer Address:_____ ___
    _____
    _____

    Telephone No.   Cell: _____
                     Home: _____

SYNODICAL SCHOOL YOU WILL BE ATTENDING:

_____

YEAR FOR WHICH YOU ARE REQUESTING FINANCIAL AID _____

YEAR OF SCHOOL (1ST, 2ND , Etc.) _____
    Are you going on vicarage or internship this year? Yes _____ No _____

ANTICIPATED GRADUATION DATE _____

MAJOR COURSE OF STUDY:
Pastoral Ministry _____ Lutheran Teaching Degree _____ Deaconess _____
Director of Christian Education _____
Other Church related field — Name _____

ESTIMATED INCOME:
    Expected summer employment income: $_____
    Expected work study or employment income: $_____
    Expected annual income of spouse: $_____

Known grants and scholarships:
  Source _____ $_____
  Source _____ $_____
  Source _____ $_____

Aid received from congregation(s) this year:
  Source _____ $_____
  Source _____ $_____

Financial aid expected from parents: $_____
                from others: $_____

(If no aid is expected from the sources above, be sure to note with "none")

  A, Total projected income $_____

  B. Projected costs for academic year $_____

  C. Actual anticipated unmet needs $_____
      (subtract line a from line b)

PLEASE EXPLAIN WHY YOU ARE REQUESTING FINANCIAL AID.
    (Outline your need for financial aid - use separate sheet if needed)

_____

_____

_____

_____ _____ _____ _____
Signature of Applicant   Date   Signature of your Pastor   Date

SEND APPLICATION TO:
        Rev. Richard C. Mueller
        WY District Student Aid
        Immanuel Ev. Lutheran Church
        P.O. Box 715
        Alliance, NE 69301
        Office: 308.762.4663
        Cell: 308.760.7213
        email: doulos63@gmail.com

Adopted August 2023