



Pacific Southwest District
Scholarship & Loan Repayment Application

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Roster Classification (check one)	<input type="checkbox"/> Pastor <input type="checkbox"/> Teacher <input type="checkbox"/> DCE <input type="checkbox"/> DPM <input type="checkbox"/> DCO <input type="checkbox"/> DFM <input type="checkbox"/> Deaconess				
Are you the Child of a Church Worker: Yes No					

EMPLOYER OR HOME CHURCH INFORMATION

Church/School		Phone	
Address		Supervisor	
Position			

EDUCATION

College		Address	
From	To	Date of Graduation	Degree
College		Address	
From	To	Date of Graduation	Degree

EDUCATION LOAN INDEBTEDNESS

Total Loan Amount	Type	Term of Loan (End Year)	Monthly Payment	Balance Owed
<i>Example: \$15,000</i>	<i>Stafford Loan</i>	<i>10 years (2029)</i>	<i>\$250</i>	<i>\$13,000</i>
			Sub Total (Balance Owed)	
Please attach the name and address of each lending institution.			Account # for Disbursal:	

ADDITIONAL LOAN INFORMATION

Date Your Loans Enter Repayment
Has Your Lender Changed Since You Last Applied For This Grant Yes No

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

Signature _____ Date _____

Please attach the following information on your loan when you apply: The most recent documentation of all outstanding Student Loans that includes:

- 1) Name of the borrower; 2) Loan amount; 3) Account number or social security number 4) The name and address of each lending institution.

MAIL, FAX or Email Completed form to:
 Fax: 949-854-8140 - Maddie.gong@psd-lcms.org
 949-854-3232 ext 201

Maddie Gong - Pacific Southwest District
 President's Office, Student Aid Program
 1540 Concordia Drive East, Irvine, CA 92612-3203