

DIOCESAN FORM

2012-2013

This form must be completed for any applicant whose course of study at The School of Theology has been approved by his/her Bishop and/or Diocese. Please complete the form in its entirety. Do NOT leave any items blank.

Applicant's **Full Name**: _____

Diocese: _____

The applicant is a: _____ postulant; _____ candidate; _____ neither, but has our support to embark on a course of study at The School of Theology, The University of the South.

If you will be providing support for this applicant from diocesan funds, please complete the following:

Amount of diocesan support for the 2012-2013 academic year \$ _____

Funds will be sent:

- _____ a. directly to the student
_____ b. to the Office of Financial Aid for crediting the student's account

If "b"

- _____ 1. we will automatically send the funds
_____ monthly
_____ quarterly
_____ at the beginning of each semester; or

_____ 2. we wish to be billed by The University
_____ at the beginning of the academic year
_____ at the beginning of each semester

We request that the applicant be considered for any available and applicable University funds for which he/she qualifies (given the University's policies for awarding such aid). We agree to furnish the Office of Financial Aid at The University of the South with information on all funds given or loaned to this applicant of which we have knowledge.

Signature

Title

Date

Diocese

**PLEASE COMPLETE AND RETURN TO:
Office of Financial Aid
The University of the South
735 University Avenue
Sewanee, Tennessee 37383-1000**