Asia-Pacific Nazarene Theological Seminary

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(632) 658-5872

www.apnts.edu.ph/



STUDENT FINANCIAL ASSISTANCE APPLICATION

Please complete the entire form. Please print clearly. Return your completed form to the Business Office. You will be notified if you qualify for any available scholarships.

Name					Г	Date	
_	Famil	y Name	Given Name	Middle Nam	 ne		
National	lity		De	Degree being pursued at APNTS			
Male	_Female	Age	Marital Status: Single _	Married	Widowed	Separated	Divorced
Mailing <i>i</i>	Address _						
Phone _			Email				······································
Local ch	ocal church membershipDenomination						
Church	E-mail Ad	dress					
Pastor's	Name		Yo	ur position or r	ministry at chur	ch	<u>-</u>
First This app	Second	d Sumr	which you plan to enroll: ner of Academic Year hed forms must be receive ble basis. There is no guara	d at APNTS in	accordance wi		
Signature:)ate:			
Complet	te and sig	n the reverse		CE USE ONLY			7
		Received				Approved	
	- 1	College GPA			_1	Disapproved	
	- 1					Postponed	
	- 1		ame				
	- 1		nted				
	- 1	Approved by _					1

Asia-Pacific Nazarene Theological Seminary INCOME AND FINANCIAL INFORMATION

Non-ministerial income Name and Address of employer last 12 months Total Income for the last 3 months: ; 1 year Name and Address of employer of spouse: Spouse's income for the last 3 months: ______; 1 year ______ Income from self-employment for the last 3 months ______; 1 year Monthly assistance from other sources: **Ministerial Income** Regular Monthly Salary ______; Other, honoraria for the last 6 months ______ Monthly assistance from the church or church-related groups per month **Ministry history** Circle your average number of ministry hours per week for the last 6 months: 10 hours 20 hours 30 hours 40 hours Identify your major church duties and report your average hours per week including preparation: Preaching _____ Counseling members _____ Teaching ___ Evangelizing _____ Administration _ Visitation _____ Other duties (list) Number of years in full time church work _____ As a Pastor ____ **General Considerations** List number and ages of persons living in your home: After completing my degree, my plans for ministry are: ______ Special circumstances that may impact your application (e.g. paying for child's tuition; financial support of extended family members, etc.) _____

To the best of my ability I have fully and truthfully disclosed all information.

Signature	Date
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