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TO: Applicant for Ministerial Student Aid

FROM: Randy Millwood

SUBJECT: Ministerial Student Aid Package

Enclosed is an application package for Ministerial Student Aid (MSA) and a copy of the Guidelines for such aid. Please read the Guidelines carefully. When you file your application, be certain all of the items listed below have been included. No action on your application can be taken until all of the requested information has been supplied.

- Application (pages 1-3)
- Church Statement (page 4)
- Financial Aid Agreement (page 5)

When you have all of the above items completed, please send them to:

Randy Millwood or Gail Noda
Baptist Convention of Maryland/Delaware
10255 Old Columbia Road
Columbia, Maryland 21046-1716

GUIDELINES FOR MINISTERIAL STUDENT AID

The Ministerial Student Aid (MSA) Fund was established to assist ministerial students with their seminary education in preparation for a church-related vocation. The terms for granting assistance are as follows:

1. To be considered for MSA, a student must be a member of a Baptist church affiliated with the Baptist Convention of Maryland/Delaware for at least one year prior to his/her application for aid. Exceptions may be considered by the BCM/D Leadership Development and Support Team.
2. The applicant must have made a public commitment in his/her local church to a church-related vocation.
3. Each new applicant must complete the MSA application and supporting documents in order to be considered for MSA.
4. Renewal: Seminary students must be enrolled full-time (a minimum of 9 hours) and must file a renewal card each semester to continue receiving aid. Students in the Off-Campus Degree Program will continue to receive aid if enrolled in **two** or more courses during one semester.
5. When a student graduates or drops out of school for one or more semesters, it is the responsibility of the student to so notify the Ministerial Student Aid office in writing.
6. No aid will be granted to a student for course work beyond the basic seminary degree or diploma (M.Div., Diploma in Theology, M.C.E., or M.C.M.).
7. Due to the limited amount of scholarship funds, students will not receive aid for more than two semesters of work per academic year or for more than six semesters.
8. MSA checks will be mailed at the beginning of the semester for which aid is being granted. (Students are expected to pay full fees to their schools. MSA checks are issued to students, not to institutions.)
9. Application deadlines are as follows:
Fall Semester: April 1
Spring Semester: October 1
10. Aid will be granted only to those students attending a Southern Baptist seminary, the SBTS Off-Campus Degree Program in Columbia/Silver Spring or an evangelical seminary accredited by the Association of Theological Schools. Applications for aid from older students who plan to attend a Bible institute may be considered by the Team. Preferences will be given to students attending one of the six SBC seminaries or who are enrolled in the SBTS Off-Campus Degree Program.
11. Should a MSA recipient decide to enter a vocation other than church-related, he/she will be expected to repay the total amount of aid received plus interest at the rate of 6% per annum.
12. A student may receive financial aid from only one Baptist Convention of Maryland/Delaware source.

For Office Use Only

DATE RECEIVED _____

ACTION TAKEN _____

**BAPTIST CONVENTION OF MARYLAND/DELAWARE
MINISTERIAL STUDENT AID APPLICATION**

GENERAL INFORMATION (PLEASE PRINT OR TYPE)

Name

| | | | |
|------|-------|--------|----------------|
| Last | First | Middle | Name Preferred |
|------|-------|--------|----------------|

Address

| | | |
|--------|--------|------------|
| Number | Street | Apt./Box # |
|--------|--------|------------|

| | | | |
|------|-------|----------|-------------|
| City | State | ZIP Code | Telephone # |
|------|-------|----------|-------------|

Address to which MSA check should be sent if different from above (Seminary P.O. Box #):

| | | |
|--------|--------|------------|
| Number | Street | Apt./Box # |
|--------|--------|------------|

| | | | |
|------|-------|----------|-------------|
| City | State | ZIP Code | Telephone # |
|------|-------|----------|-------------|

Date of Birth _____ Place of Birth _____ Soc. Sec. # _____

Marital Status Married Single Divorced Widowed

Names and Ages of Children _____

I was baptized on _____, _____, by the _____

Baptist Church located at _____
City, State

I am presently a member of the _____ Baptist Church located at
_____, Maryland/Delaware.

EDUCATIONAL BACKGROUND

High School attended _____ in _____
City, State

Year of High School Graduation _____

College(s) attended/location _____

Year of College Graduation _____ Major/Degree _____

CURRENT EDUCATION

Seminary you are/will be attending _____

Year in Seminary ____ First ____ Second ____ Third

OR I am enrolled in the SBTS Off-Campus Program in Columbia _____ or Silver Spring _____

Projected Year of Seminary Graduation _____

FINANCIAL INFORMATION

Present Employment _____

Position or Type of Work _____

Approximate Annual Income \$_____ Hours per Week Employed _____

Employment will ____ will not ____ continue during school year.

What other source(s) of income do you have?

Would you be able to attend school without this aid? ____ Yes ____ No

What expenses do you hope this aid will cover? _____

REFERENCES

Local Pastor _____

Adult Friend _____

Address _____

Address _____

Phone (____) _____

Phone (____) _____

Other _____

Other _____

Address _____

Address _____

Phone (____) _____

Phone (____) _____

MINISTERIAL STUDENT AID CHURCH STATEMENT

NOTE: To be completed by a church affiliated with the Baptist Convention of Maryland/Delaware. **PLEASE PRINT OR TYPE.**

At a _____ meeting of the _____
(regular or called)

Baptist Church of _____, Maryland/Delaware, held this _____ day of
_____, _____, it was resolved that we endorse and approve application of
(month) (year)

our Brother/Sister, _____, and recommend this application for the favorable action of the Leadership Development Committee of the General Mission Board, Baptist Convention of Maryland/Delaware.

Signature of Church Clerk

Signature of Pastor/Moderator

Please return this form to applicant. It is part of his/her Ministerial Student Aid Application package. Thank you.

**MINISTERIAL STUDENT AID
FINANCIAL AID AGREEMENT**

Should I discontinue my course of study in preparation for the ministry or for any reason give up my present purpose or voluntarily turn aside from the Baptist ministry to some other occupation, I hereby agree to repay the amount expended for my benefit with interest of 6% per annum to the Baptist Convention of Maryland/Delaware.

Signature _____

Date _____

PLEASE PRINT OR TYPE:

Name _____

Home Address _____
