



GRANT CONSIDERATION WILL BE GIVEN TO ACCEPTED, FULL-TIME, DEGREE-SEEKING STUDENTS

DEADLINES
FALL - Aug. 1 ■ WINTERIM/SPRING - Nov. 15 ■ SUMMER - April 15

ENROLLMENT INFORMATION	CONTACT INFORMATION
<p>REQUESTING ASSISTANCE FOR <input type="checkbox"/> FALL <input type="checkbox"/> WINTERIM <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER YEAR 20____</p> <p>STUDENT CLASSIFICATION <input type="checkbox"/> DEGREE SEEKING (Matriculating) <input type="checkbox"/> NON-DEGREE SEEKING</p> <p>PROGRAM OF STUDY <input type="checkbox"/> BIBLE <input type="checkbox"/> COUNSELING <input type="checkbox"/> TEACHER ED <input type="checkbox"/> M DIV <input type="checkbox"/> ED LEADER <input type="checkbox"/> ORG LEADER</p>	<p>SSN: _____</p> <p>NAME: _____</p> <p>ADDRESS: _____ _____</p> <p>COUNTRY: _____</p> <p>EMAIL: _____</p> <p>HOME PHONE: _____</p> <p>WORK PHONE: _____</p>

PERSONAL INFORMATION

<p>U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO, VISA TYPE: _____</p> <p>DO YOU HAVE A SPONSOR? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>ARE YOU A VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>EXPECT TO RECEIVE BENEFITS? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
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SPOUSE'S NAME: _____	<p>DOES YOUR SPOUSE ATTEND SCHOOL? <input type="checkbox"/> YES (Indicate below) <input type="checkbox"/> NO</p>	
NAME OF SCHOOL	PROGRAM	SEMESTER HOURS

CHILDREN		ATTACH A SHEET FOR ADDITIONAL CHILDREN	
NAME	AGE	SCHOOL NAME	PRIVATE/PUBLIC?

CURRENT EMPLOYMENT INFORMATION

APPLICANT					
EMPLOYER	POSITION	PHONE	HOW LONG	PAY	HOURS
			yr(s)	/hr	/wk
			yr(s)	/hr	/wk
SPOUSE					
			yr(s)	/hr	/wk
			yr(s)	/hr	/wk

FINANCE INFORMATION

CURRENT DEBTS	
TYPE	TOTAL BALANCE
MORTGAGE	\$_____00
AUTO LOAN	\$_____00
CHARGE CARDS	\$_____00
BANK/PERSONAL LOANS	\$_____00
EDUCATION LOANS	\$_____00
OTHER_____	\$_____00

LIST TOTAL AMOUNTS
OWED, NOT MONTHLY
PAYMENTS

BUDGET	
SOURCE	MONTHLY AMOUNT (NET)
SALARY (self)	\$_____00
SALARY (spouse)	\$_____00
CHURCH	\$_____00
FAMILY	\$_____00
FRIENDS	\$_____00
OTHER_____	\$_____00
TOTAL MONTHLY BUDGET	\$_____00

MONTHLY EXPENSES	
EXPENSE	AMOUNT
RENT/MORTGAGE	\$_____00
FOOD	\$_____00
UTILITIES	\$_____00
TELEPHONE	\$_____00
CLOTHING	\$_____00
CHILD CARE/PVT SCHOOL TUITION	\$_____00
TRANSPORTATION	\$_____00
DEBT PAYMENTS	\$_____00
INSURANCE	\$_____00
GIFTS/DONATIONS/OFFERING	\$_____00
OTHER #1 _____	\$_____00
OTHER #2 _____	\$_____00
OTHER #3 _____	\$_____00
OTHER #4 _____	\$_____00
TOTAL MONTHLY EXPENSES	\$_____00

IF YOUR MONTHLY EXPENSES EXCEED YOUR MONTHLY BUDGET YOU **MUST** DOCUMENT HOW YOU FUND THE DIFFERENCE. FAILURE TO PROVIDE EXPLANATION WILL RENDER YOUR APPLICATION INCOMPLETE.

FEDERAL TAX DATA (most recent completed tax year)	
NUMBER IN HOUSEHOLD _____	NUMBER IN COLLEGE _____
TAX ELEMENT	AMOUNT RECORDED
ADJUSTED GROSS INCOME	\$_____00
U.S. INCOME TAX PAID	\$_____00
INCOME EARNED FROM WORK (APPLICANT)	\$_____00
INCOME EARNED FROM WORK (SPOUSE)	\$_____00
UNTAXED INCOME AND BENEFITS	
	\$_____00
SOCIAL SECURITY BENEFITS	\$_____00
AID TO FAMILIES W/DEP CHILDREN	\$_____00
CHILD SUPPORT	\$_____00
OTHER _____	\$_____00
ASSET INFORMATION	\$_____00
CASH, SAVINGS, CHECKING	\$_____00
OTHER REAL ESTATE AND INVESTMENT VALUE	\$_____00
OTHER REAL ESTATE AND INVESTMENT DEBT	
	\$_____00
BUSINESS VALUE	\$_____00
BUSINESS DEBT	\$_____00
FARM VALUE	\$_____00
FARM DEBT	\$_____00

GRANT INFORMATION

<p>DOES YOUR EMPLOYER PROVIDE TUITION REIMBURSEMENT FOR WHICH YOU ARE ELIGIBLE?</p> <p style="text-align: center;"> <input type="checkbox"/> YES <input type="checkbox"/> NO </p> <p>I WILL ALSO BE RECEIVING THE FOLLOWING PBU DISCOUNTS*</p> <p style="text-align: center;"> <input type="checkbox"/> CHURCH MATCHING GRANT <input type="checkbox"/> SPOUSE DISCOUNT <input type="checkbox"/> ORGANIZATION DISCOUNT </p> <p><small>*SEE YOUR GRAD ENROLLMENT COUNSELOR FOR DETAILS</small></p>	<p>ARE YOU SCHEDULED TO RECEIVE AID FROM OTHER NON-PBU SOURCES?</p> <p style="text-align: center;"> <input type="checkbox"/> YES, AMOUNT? \$_____00 <input type="checkbox"/> NO </p> <p>NUMBER OF CREDITS BEING TAKEN WITHIN THE SEMESTER FOR WHICH I AM SEEKING ASSISTANCE:_____</p> <p>AMOUNT REQUESTED: \$_____00 <small>(FULL GRANTS ARE NOT AWARDED, SO CAREFULLY CALCULATE HOW MUCH YOU NEED AND EXPLAIN BELOW)</small></p>
DESCRIBE THE CIRCUMSTANCES REGARDING YOUR REQUEST:	
STATE YOUR CAREER OBJECTIVES/MINISTRY GOALS AFTER GRADUATION:	

STATEMENT OF AFFIRMATION

I AFFIRM THAT THE FACTS SET FORTH IN THIS GRADUATE NEED-BASED APPLICATION ARE TRUE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF ANY DATA WILL BE CONSIDERED SUFFICIENT CAUSE FOR REVOCATION OF ANY PBU ASSISTANCE.

SIGNATURE	DATE
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INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.
 REVIEW YOUR APPLICATION FOR COMPLETENESS AND ACCURACY
 SUBMIT BY MAIL (DO NOT FAX) TO THE ATTENTION OF: GRADUATE ENROLLMENT SERVICES.