CANADIAN SOUTHERN BAPTIST SEMINARY and COLLEGE

## APPLICATION FORM IMB Dependents Tuition Benefit

For dependents of IMB field missionaries

To be eligible for this tuition benefit, a student must be a dependent of a person who either currently is or in the past was a field missionary of the International Mission Board (IMB). The student must be fully admitted to an undergraduate or graduate program of the CSBS&C by the age of 30 and is expected to demonstrate consistency in academic studies (minimum cumulative GPA of 2.3). The maximum amount of this tuition benefit is 50% of the regular tuition (fees are not included). The scholarship committee will determine the amount of the tuition benefit to be granted based on the years of service accomplished by the student's parents as IMB field missionaries.

Application Deadline: see CSBS&C website

Upon approval of this application the student will receive a tuition benefit (excluding fees) for one school year only. The student will be responsible to re-apply for each new school year.

Please be aware that by applying for this tuition benefit you will not be eligible to submit an application for any other scholarships or tuition benefits available at CSBS&C.

Name:		Telephone No		
(Surname)	(First)	(Middle initial)	_	
Address:	tal box)	(C:t)		(Province/State) (Postal code/ZIP)
(Street or Posi	tal box)	(City)		(Province/State) (Postal code/ZIP)
Email Address:				
Social Insurance Number (SIN):			Birth date: _	
Citizenship: 🗖 Canadia	an 🗖 Permanent Resid	dent 🛭 Student Vis	a □ Other_	
CSBS&C Program of St	udy:	Month/Yea	of admission	n to this program:
Number of Credit Hour	s earned at CSBS&C:_	Cumulative	GPA:	
Number of Credit Hour	s enrolled in this sem	ester:		

Please provide the following information for your parents stating places of service as IMB field missionaries							
Include all field missionary positions starting with the first day your parents were appointed by the IMB:							
Names of parents:							
Name of city and country	Position	Period: Month/Year to Month/Year					
		Total years of service:					
Student Signature Date							
Scholarship Committee Action							
Total years of service: Approved for Tuition Benefit Amount: \$\frac{1}{2} /credit hour  Not Approved							
Comments							
Date:	Signature	Signature	Signature				