

DIOCESAN TUITION ASSISTANCE FORM

Form D

ST. BERNARD'S SCHOOL OF THEOLOGY & MINISTRY AT ALBANY

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Phone: 518-453-6760

Fall _____ Spring _____ Summer _____

(Fill in the year next to the semester you are registering for.)

DEADLINES: Fall: September 15 – Spring: January 15 – Summer: May 15

APPLICANT: Name: _____

email address: _____

Parish: _____ City _____

Course(s): # _____ Title _____

_____ Title _____

Diocesan Tuition Assistance will only be applied if the following conditions have been met:

- * student submission of one-third of the total tuition costs plus the \$30. registration fee, at the time of registration;
- * completion of this form for each semester;
- ° absence of any incomplete grades or outstanding fees.

At this time we will continue to offer 1/3 of the cost of each course to students. Financial Assistance from the Diocese has always been committed to us for our students. Hopefully this will not be depleted as we move forward.

SPONSOR: This section must be signed by the sponsor indicating the applicant is active in the Parish and/or a Diocesan Ministry.

Sponsor's Name _____
(Please Print)

Leadership Position _____ Place _____

I recommend _____ for graduate studies at St. Bernard's.

Sponsor's Signature _____ Phone _____ Date: _____