



**Upper New York Annual Conference
The United Methodist Church
Board of Ordained Ministry
Doctoral Scholarship Program**

BASIS:

The basis for all grants is demonstrated financial need.

ELIGIBILITY:

Scholarship help is extended to clergy persons enrolled in a DMin. or PhD program at an accredited school as the BOM budget allows

GRANT PERIOD:

Grants are made for the academic year, September through May or June. **REAPPLICATION MUST BE MADE EACH YEAR; IT IS THE RESPONSIBILITY OF THE APPLICANT TO OBTAIN THE FORM and TO REAPPLY.**

-APPLICATION DEADLINES:

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Except in special cases, applications for an educational grant beginning with the fall semester must be received by the chair of the Grants Committee on or before **June 30 of each year.**

GRANT PAYMENTS:

Checks are mailed twice annually (50% of the grant in each payment). The first check is mailed about mid-August. The second check is mailed about mid-December. Checks are made payable jointly to the student and the school and are mailed to the student.

GRANT APPLICATION PROCEDURE:

1. Forms will be available to download from the Upper New York Website BOM page.
2. Read the educational grant policy information carefully.
3. Complete the grant application in full, in ink. Complete the ESTIMATE OF EXPENSES and FINANCIAL RESOURCES in detail, showing all expenses and all resources, not just academic costs. Incomplete applications will be returned to the applicant.
4. The applicant should send the completed application to the Scholarship Grant officer listed below.

SCHOLARSHIP PROGRAMS

Upper New York Seminary Grants:

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Scholarship Aid for Doctoral Students is offered at the rate of \$500 per semester up to a total of \$3000 per degree program.



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Application for Doctoral Studies Grant

1. Name (Last, First, Middle) _____

2. Address _____

City _____ State _____ Zip _____ Phone _____

E-mail address(es) _____

3. Current appointment _____

4. Educational Institution _____

5. Degree program in which you will be enrolled _____

6. Date program term/module begins _____

7. What is the total amount you have received already from this Grant Program previously? \$ _____

8. Estimate of Expenses for the coming academic year (9 months)

Tuition and Fees \$ _____

Books and Supplies \$ _____

Food \$ _____

Housing \$ _____

Travel to and from school \$ _____

Other _____ \$ _____

TOTAL EXPENSES \$ _____

9. Other financial assistance you expect to receive, such as loans, scholarships, etc. _____

10. Unmet financial need for the coming academic year _____

11. Please use the space below to elaborate any of your answers or to bring to the attention of the grants committee any special financial circumstances which you feel will be helpful for us to know as we consider your application.

12. Because of the financial need shown above, I hereby apply for a grant from the Upper New York Conference of the United Methodist Church. If awarded, the grant will be applied toward my educational expenses as outlined above.

Signature _____ Date _____

PLEASE RETURN COMPLETED FORM(S) TO:

Rev. Anne Canfield
First UMC Watertown
236 Mullin Street
Watertown, New York 13601
phone:607-765-6731 email: annebcanfield@gmail.com

On or before June 30