



## Family Aid Tuition Assistance Application

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### **PERSONAL INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Degree Program: \_\_\_\_\_ FAFSA filed: y / n

How many credits are you planning to take (do not include audit or enrichment)?

Fall: \_\_\_\_\_ Spring: \_\_\_\_\_ Summer: \_\_\_\_\_

Are you receiving any other financial assistance? If yes, please specify:

\_\_\_\_\_  
\_\_\_\_\_

### **APPLICATION ESSAYS** (each essay should be 300 words or less)

1. Outline any personal and professional goals that have motivated you to further your education at Mars Hill Graduate School.
2. How would you define the role of faith and biblical understanding in your desire to pursue the goals named in question one?
3. When you have completed your Mars Hill Graduate School education, what do you hope has been addressed within you?

### **ELIGIBILITY CRITERIA**

Students who meet with following criteria are invited to apply:

1. Have completed one year of study at Mars Hill Graduate School with a cumulative GPS of 2.7 or higher.
2. Must be enrolled in a degree or certificate program full-time (at least 8 credits not including audit or enrichment).
3. Completed the Free Application For Student Aid (FAFSA).

### **TUITION ASSISTANCE TERMS**

- With the exception of the FFELP aid, MHGS Student Tuition Assistance is not combinable with any other institutional scholarships.
- Recipients who drop below full time status or withdraw from active enrollment may bear responsibility for full repayment of all tuition assistance funds paid for the trimester.
- Students who are not selected to receive the award may compete in subsequent years, but no student is guaranteed to receive the award more than once.
- The rules and regulations governing other sources of financial aid (federal, state, institutional and other grants, gifts or loans) will apply.

I certify that the statements made in this application are true and that I have read and am familiar with eligibility requirements and scholarship terms. I hereby grant permission to the Tuition Assistance review committee to review such documents as necessary to make a determination of my qualifications, including but not limited to, my admissions application, my Student Aid Report, and my academic transcript.

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please return this application before June 15th to:  
Mars Hill Graduate School, Attn: Financial Aid Office  
2501 Elliott Avenue, Seattle, WA 98121