Terms of Agreement for Receiving 50% United Methodist
Ministerial Tuition at American University

Because of the historical ties of American University to the United Methodist Church, the University has instituted the United Methodist Ministerial Tuition Remission program to benefit dependent children of clergy and deacons of the Pan-Methodist Commission who are enrolled at AU. The 50% tuition remission is a courtesy extended by AU to United Methodist clergy and deacons whose dependent child (as per definition of IRS) is enrolled full-time in an undergraduate degree program. The grant is not guaranteed and is awarded as long as university funds are available, for a total of eight regular semesters. It is not valid for summer sessions.

In order to continue receiving this benefit each semester, students who are accepted into the program must agree to abide by the following terms as set forth in the policy for receiving the United Methodist Ministerial Tuition Remission:

$ Must be a dependent of an active ordained Pan-Methodist Commission clergy or deacon who is under appointment by the Resident Bishop, to full-time service in the Church. (Please include a copy of active appointment from a current Church Directory with the signed attached form.)
$ Up to half-tuition awards will be made as long as University funds are available.
$ Must be enrolled full-time in an undergraduate degree program prior to reaching his/her 23rd birthday.
$ Must be registered no less than 12 credit hours minimum each semester. The student must notify immediately the Office of the University Chaplain if he/she falls below the required 12 credit hours.
$ Must show proof of his/her registration each semester to the scholarship officer in the Office of the University Chaplain.
$ Must maintain a GPA of no less than 2.0 in a 4.0 scale each semester, as proof of academic progress toward earning his/her degree.
$ Must notify the Office of University Chaplain upon withdrawal from the University.

Student Signature _____ Date _____

Printed Name _____ SS# _____

Permanent Address _____ Tel. _____

_____ Email _____

Guardians Signature _____ Date _____

Address _____ Tel. _____

_____

Kay Spiritual Life Center Office Use Only

Approved by _____ Date _____

First Award Given _____ # Still Available _____