

New England Bible College
PO Box 2886
South Portland, ME 04116-2886
207-799-5979

FINANCIAL AID APPLICATION

General Criteria:

Tuition grants may be made to qualified needy students as the funds are available. Funds for tuition grants are limited, so decisions concerning these grants will be made on a case-by-case basis. The Financial Aid Committee will review each application and make its decision based on the following criteria:

1. Full-time students will be given preference over part-time student.
2. Degree students will be given preference over Certificate students.
3. The amount of the grant will be based on the need of the student and the level of the student's commitment to the program.
4. Students taking less than 6 semester credit hours are not eligible for tuition grants.
5. Students currently on academic probation are not eligible.

Please Print or Type the following information:

Personal Information:

Name: _____ Name of spouse: _____ # of children _____

Mailing address: _____ Phone: _____

Church Membership (name & phone #): _____

Pastor's name: _____

I am enrolled in the _____ concentration of study at NEBC

This is my _____ semester of study (1st, 2nd, 3rd) and I am enrolled for _____ credits.

Income:

Salary/Wages (applicant) \$ _____

(Spouse :) \$ _____

Dividends/Interest \$ _____

Rent/Royalties/other \$ _____

Total Income: \$ _____

Assets:

Bank Accounts/other cash assets _____

Investments (stocks, bonds, _____

Mutual funds, real estate, other) _____

Total Assets: _____

Expenses:

Outstanding loans:

Name/Kind: _____ \$ _____ per month for _____ months

Name/Kind: _____ \$ _____ per month for _____ months

Name/Kind: _____ \$ _____ per month for _____ months

Credit Card Dept \$ _____

Medical Bills \$ _____

Housing Costs \$ _____

Automobiles (debt owed) \$ _____

Other Costs \$ _____

Total Monthly Expenses \$ _____

Please describe any extraordinary financial circumstances that affect your ability to pay tuition at this time:

I am applying for financial assistance for the following tuition amount due:

total amount of assistance I am requesting \$ _____
minus the amount I can pay \$ _____
total amount of assistance I am requesting \$ _____

I declare that the financial and other information submitted on this form is correct.

signature

date

(office use only)

After review by the Financial Aid Committee the above student has been approved for the following tuition aid. \$ _____ Date _____

This tuition aid is to be applied to the student's account listed on this form. These monies will not be refunded to the student in the form of a check or cash for any reason. If for any reason any part of this grant becomes a credit on the student's account it will be put back into the Tuition Aid Program account.