H.R. MacMillan Fund VANCOUVER SCHOOL OF THEOLOGY Clergy Financial Aid

Revised May 2019

- The VST Financial Aid Committee will consider applications four times per fiscal year. Application deadlines:
 - April 30 and June 1 (for May–August programs),
 - Sept. 10 (for September-December programs),
 - Jan 15 (for January-April programs).
- O Grants will only be considered for clergy in good standing with their respective denominations. Applications must include appropriate confirmation indicating good standing within their denomination from the following: (email directly to the VST Financial Aid Officer at financialaid@vst.edu)
 - ACC Diocesan Bishop
 - UCC Regional Vocations Minister
 - PCC Clerk of Presbytery
- Priority will be given to applicants continuing their education at VST. Please be aware that funding available for non-VST courses is extremely limited.
- O Grants to applicants for continuing education courses will be restricted to a maximum of \$400 per fiscal year (May April).
- **O** Grants will be made for Clinical Pastoral Education applicants only after the applicant has supported themselves through the first two units. Since these courses are not offered by VST but are required for VST degree credit, support will be limited to 50% of the equivalent VST tuition fee based on credit hours.
- Grants shall not be made for the following:
 - a course already completed by the applicant;
 - non-VST courses taken by applicants from outside British Columbia and the Yukon;
 - applications from lay persons;
 - clergy on Leave of Absence will not normally be supported;
 - retired clergy will not normally be supported. However, retired clergy engaged in accountable ministry may apply to the fund regarding programs related to their ministry.

VANCOUVER SCHOOL OF THEOLOGY

Application Form H.R. MacMillan Fund Grant

FOR ORDAINED CLERGY ONLY

Email Application To: Financial Aid Officer Vancouver School of Theology 6015 Walter Gage Road Vancouver, BC V6T 1Z1 Email: financialaid@vst.edu S.I.N.: _____ NAME: ___ PREFFERED TITLE: ______ (i.e. - Reverend, Bishop etc) ADDRESS: POSTAL/ZIP CODE: _____ PHONE NO.: _____ EMAIL ADDRESS: NAME OF YOUR DIOCESE OR PRESBYTERY: DENOMINATION:_____ RECORD OF SERVICE: CURRENT MINISTRY: EDUCATIONAL QUALIFICATIONS: _____ COURSE OF STUDY FOR WHICH GRANT IS APPLIED COURSE NAME: INSTITUTION: LOCATION: ______ FINISH DATE: ___ STARTING DATE: **BUDGET** (attach full details for lengthy periods of study) **EXPENSES: FUNDING SOURCES:** COURSE FEES: **DENOMINATION:** LIVING EXPENSES: \$ ____ CONGREGATION: TRAVEL: OTHER: \$ \$ OTHER (specify): \$ **SELF** MacMILLAN REQUEST \$ TOTAL: \$ TOTAL: \$

Signature: _____ Date: _____