

## **Board of Ordained Ministry**

## of the South Carolina Annual Conference of The United Methodist Church Course of Study Scholarship Application

**Directions:** Upon completion of course(s), send this signed scholarship application to the local pastor registrar (see below). A copy of your official grade report must be submitted with this scholarship application. These links are provided to assist in your Course of Study selection/registration:

- United Methodist Licensing and Course of Study
- Duke Summer Course of Study
- Duke Weekend Course of Study
- Candler Course of Study
- GBHEM Online Course of Study

## **NOTES**

- The S.C. Annual Conference requires a grade of C or higher in all COS classes. Grades lower than C will require the retaking of that class to be recognized. Classes that have to be retaken are not eligible for financial aid.
- You may be responsible for taxes associated with the financial aid received. It is your responsibility to consult a tax professional to assess your legal responsibilities in this regard.
- Costs beyond the scholarship award are the responsibility of the student.

| Full name:                          |                     |  |          |                    |  |
|-------------------------------------|---------------------|--|----------|--------------------|--|
| Mailing address:                    |                     |  |          |                    |  |
| Email address:                      |                     | Telephone:                                   |          |                    |  |
| Appointment:                        | I                   | District:                                    | Social S | Social Security #: |  |
| Please list below the school and co | ourse number(s) con | npleted:                                     |          |                    |  |
| School:                             |                     |  |          |                    |  |
| Course numbers: 1)                  | 2)                  | 3)   | ·        | 4)                 |  |
| Student signature                   |                     | District Superintendent signature (required) |          |                    |  |
| Date                                | Date                |  |          |                    |  |
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**Send completed application to:** Rev. Jerry McManus, Local Pastor Registrar

Email: jcmcmanussr@umcsc.org

Address: 523 Wamble Hill Rd. Chesterfield, SC 29709-5333

Phone: 843-680-0611