



Wesleyan Holiness Consortium MOU Agreement Discount

Please complete all fields on this form using a black or blue ink. Report "N/A" for not applicable fields. Incomplete forms will be returned and will cause a delay in processing your financial aid application.

APU ID#: Academic Program:

Student Name: Last First M.I.

APU will offer a 15% tuition discount for eligible members (and their spouse or dependents under to age 26) of the Wesleyan Holiness Consortium who have entered into an MOU agreement with APU Seminary. Eligible programs are the DMIN, MDIV, MA Pastoral Leadership, and MATUL. In order to apply the discount to the student's account, please fill out the following information.

Discount Information:

- The tuition discount is subject to coordination with Federal, State, and institutional regulations, which may result in a reduction of other aid in the student's financial aid package.
Discount will be applied to the student account after the add/drop date each term.
Verification information needed in order to process the discount: pastor's signature and business card.

Discount Disclaimers:

- This tuition discount will be discontinued for the next term/session if and when the MOU (Memorandum of Understanding) between APU and the agency/organization expires.
This tuition discount will be discontinued if and when the church member is no longer a member of the Wesleyan church.
This tuition discount cannot be received for more than four years of enrollment.
Student must remain continuously enrolled at least half time for each term.
Student must maintain at least a 3.0 GPA as part of the Satisfactory Academic Progress (SAP) requirements.

Table with 3 columns: Fall 2017, Spring 2018, Summer 2018. Each column has a header 'List the number of units student plans to take:' and a sub-header '#'. The cells are currently empty.

The discount applies to (select one): Self Spouse dependent- Date of birth: provide proof of D.O.B
If spouse or dependent:
Name of member:
Signature of member:

Denomination

*Pastor's Signature Date

By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

Student Signature (Required- digital signature not accepted)

Date

MAILING ADDRESS

AZUSA PACIFIC UNIVERSITY GRADUATE AND PROFESSIONAL CENTER: SFS P.O. BOX 7000

AZUSA, CA 91702-7000 Phone (626) 815-4570 Fax (626) 815-4545

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