

# EDUCATION FOR MINISTRY

## Financial Aid Application

Episcopal Diocese of Pennsylvania

---

### PERSONAL DATA

NAME \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) \_\_\_\_\_

### EDUCATION FOR MINISTRY INFORMATION

MENTOR: \_\_\_\_\_

MENTOR ADDRESS: \_\_\_\_\_

LOCATION: \_\_\_\_\_

YEAR: \_\_\_\_\_ EXPECTED GRADUATION DATE: \_\_\_\_\_

### FINANCIAL

Please be aware that the *maximum* grant for EFM is \$100.00. If it is necessary to ask for more than this amount, please ask your EFM mentor to contact Canon Arlette Benoit Joseph ([abenoitjoseph@diopa.org](mailto:abenoitjoseph@diopa.org) or 215-627-6434 x102) to discuss your individual circumstances. Please inquire if funds are available from your home parish to assist in your Education for Ministry. You may also inquire through your mentor if funds are available from the EFM Memorial Scholarship Fund.

GRANT REQUEST AMOUNT \$ \_\_\_\_\_

Check is payable to the School of Theology Program Center and mailed directly to your EFM Mentor.

WHAT ARE YOUR EXPECTATIONS OF THIS PROGRAM AND HOW DO YOU THINK IT WILL HELP YOU IN YOUR MINISTRY WITHIN THE DIOCESE OF PENNSYLVANIA? Use an additional sheet of paper if necessary

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YES     NO *I would be willing to share my experience with other parishes in the diocese.*

CLERGY ENDORSEMENT \_\_\_\_\_ DATE \_\_\_\_\_

Please return this application to:  
Canon Arlette D. Benoit Joseph  
Diocese of Pennsylvania  
3717 Chestnut Street, Suite 300  
Philadelphia, PA 19104