

About the 2009-2010

Corporate Partnership Scholarship:

In order to meet the growing demands of professionals with busy schedules, Bethel University is proud to offer a variety of options for you and your organization. Through the Bethel Corporate Partnership Scholarship, eligible employees may receive the following:

- Employees enrolled in a **Master's** degree program may receive **\$500 per semester** (\$1,500 year)
- Employees enrolled in a **Bachelor's** degree program may receive **\$350 per semester** (\$1,050 per year)

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Requirements:

Students must:

1. Be admitted as a Bethel student into the College of Adult and Professional Studies and/or Graduate School.
2. Complete the scholarship application (see reverse) and submit it to the Bethel University Financial Aid Office prior to the start of class.
3. Maintain a minimum enrollment of 6 semester credits per term.
4. Maintain satisfactory academic progress toward your degree (see student handbook).
5. Maintain employment with a Bethel University Corporate Partner

Frequently Asked Questions:

How long will this scholarship be available to me? Bethel Corporate Partnership Scholarship will be offered for up to 2 years, or the completion of your program.

Do I need to re-apply for the scholarship each year? Yes, you will need to complete the Corporate Partnership Scholarship each year.

If I decide to take fewer than 6 credits a semester, do I lose my scholarship? You will not receive the scholarship during the semesters you take fewer than 6 credits. However, the scholarship will resume once you enroll again for at least 6 credits.

May I seek additional resources to pay for my schooling? Yes, if you are completing a Bachelor's degree you may be eligible for grants and Stafford loans. If you are completing a Master's degree you may be eligible for Stafford loans. Additional information can be found at <http://www.bethel.edu/finaid>.

**Amounts listed are for the 2009-2010 school year and assume a minimum enrollment of 6 credits per term. Dollar amounts are subject to change for future years.*

2009-2010 Application
Corporate Partnership Scholarship



Students expecting to enroll and receive the Bethel Corporate Partnership Scholarship must complete and submit this application to the Bethel University Financial Aid Office. Students who receive this scholarship must also maintain a minimum enrollment of 6 semester credits and be employed with a Bethel University Corporate Partner.

Please note: This form is used only to apply for the Bethel Corporate Partnership Scholarship. It is not an application for admission into the program or an application for any other types of financial aid. Students who apply for the Bethel Corporate Partnership Scholarship must also apply for admission in order to be considered for a program.

Part I: Student

Name: _____
Last First Middle (Maiden)

Social Security Number: _____ - _____ - _____ Bethel ID (if known): _____

Email Address: _____ Date of Birth: _____ / _____ / _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Work Phone: (_____) _____ Fax: (_____) _____

Home Address: _____
Street Address City State Zip

How many credits do you plan to take each term? Fall 2009: _____ Spring 2010: _____ Summer 2010: _____

Student status: Continuing Student New Student (Anticipated Start: Fall 2009 Spring 2010 Summer 2010)

Intended degree:

- BA Organizational Leadership BA Communication Studies BA Business Management BA Human Resources
 MA Organizational Leadership MA Communication Studies MBA

Do you also wish to be considered for other types of financial aid (like federal loans)? YES NO

If yes, please also submit the following documents:

1. FAFSA (Free Application for Federal Student Aid at www.fafsa.ed.gov; Bethel's FAFSA Code is 002338)
2. Bethel University Financial Aid Application (<http://www.bethel.edu/finaid>)

Authorization and Signature:

By signing below, I authorize the Financial Aid Office to discuss financial information with my spouse (if married).

Or please indicate your exception to the above authorization: _____

Student Signature: _____ Date: _____ / _____ / _____

My signature indicates that all the information is true and complete.

Part II: Employer (required)

Employment Status: Full-Time Part-Time Temporary

I certify that the student is currently employed with _____
Corporate Partner Name

Employer Signature: _____ Date: _____ / _____ / _____

Print Name: _____ Phone: (_____) _____

Bethel Office Use Only:

X _____

_____ / _____ / _____

PLEASE SEND COMPLETED FORM TO: Office of Financial Aid

651.635.1491 (fax) Bethel University
 651.635.6421 (phone) 3900 Bethel Drive
 finaid@bethel.edu St. Paul, MN 55112