



GOSHEN COLLEGE

Congregational Student Aid Matching Grant 2015-16 Commitment Form

The church aid program matches the first \$1,000 given for a student from a congregation's student aid plan. Beyond \$1,000 contributed, the college provides \$1 of aid for every \$4 provided by the church, up to full tuition. For example, if a congregation gives \$2,000 toward a student's tuition, Goshen College will match with \$1,250.

For participation in the program, Goshen College must receive official notification of the congregational/conference **commitment by the March 1 deadline**, including the name of each anticipated student recipient and the full amount each student will receive for 2015-16. This deadline is important for timely completion of student aid packages.

Please make one check (in U.S. dollars) payable to Goshen College and mail to the Financial Aid Office at Goshen College by the payment due dates below – do not make checks payable to students. Student accounts will not be credited with the matching grant until the church check is received, so please note due dates below. Since actual enrollment may change after August 1, the church will be refunded at registration time when the semester begins if a student does not enroll.

For information on how to set up a congregational student aid fund, including tax requirements, visit our website at: www.goshen.edu/financial-aid/church-aid. This commitment form is also available on the website. Questions may be directed to Kristyn Sleseman in Financial Aid at (574) 535-7525 or email finaid@goshen.edu.

The student(s) listed below will receive assistance from the congregation/conference as stated.

Name of Student(s)	Amount for 2015-16	
	Fall <i>(Sept.-Dec.)</i>	Spring <i>(Jan.-April)</i>
1.	\$	\$
2.	\$	\$
3.	\$	\$
4.	\$	\$
5.	\$	\$
6.	\$	\$
7.	\$	\$
8.	\$	\$
9.	\$	\$

Commitment by:

Name of congregation or conference _____ *Address* _____

City _____ *State* _____ *ZIP/Postal code* _____ *Church phone* _____ *Pastor* _____

Name of contact person (please print) _____ *Phone or email* _____ *Date* _____

Send this form and payments to:

Financial Aid Office, Goshen College
1700 S. Main St.
Goshen, IN 46526
Fax: (574) 535-7654

(This form may also be sent via www.goshen.edu/financial-aid/church-aid select "Online commitment form," complete form and "submit.")

Commitment form due: **March 1**
 First payment due: **August 1**
 Second payment due: **Decemeber 1**