



**ERSKINE**  
THEOLOGICAL SEMINARY

*For Christ and His Church*

Post Office Box 668 ~ Due West, SC 29639

Application for **Partners Scholarship Program**  
2010-2011 Academic Year

Please ALSO complete a "Scholarship Application" found online under *Institutional Scholarships*.

Completion of this form is required to be considered for this program. For information or assistance, contact Mary Stephens at 864-379-6596 or [stephens@erskine.edu](mailto:stephens@erskine.edu). Return completed form to Mary.

**New Student**

**Transfer Student**

**Current Student**

Fall 2010

Fall 2010

Fall 2010

Winter 2010

Winter 2010

Winter 2010

J Term 2011

J Term 2011

J Term 2011

Spring 2011

Spring 2011

Spring 2011

Summer 2011

Summer 2011

Summer 2011

Full Name \_\_\_\_\_  
Last First Middle Preferred

Home Address \_\_\_\_\_  
Number and Street City State Zip

Denomination \_\_\_\_\_ Degree Program \_\_\_\_\_ Expected Grad \_\_\_\_\_

Home Phone Number (\_\_\_\_) \_\_\_\_\_ Cell Number (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_ Last GPA: \_\_\_\_\_

How many credit hours are you planning to take each term during the 2010-2011 academic period?

Fall 2010 \_\_\_\_\_ J Term 2011 \_\_\_\_\_ Spring 2011 \_\_\_\_\_ Summer 2011 \_\_\_\_\_

(Qualifying for Partners Program is contingent on you registering, enrolling, and completing the hours indicated above. If you plan to take classes for terms beyond Summer 2011, new forms will be required.)

I understand if I drop below the required credit hours in the academic year (September 2010 through August 2011), I will owe the full amount of my tuition as I will no longer qualify for the Partners Scholarship Program.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

***Erskine Seminary does not discriminate against applicants and students on the basis of handicap, race, sex, color, religion, or national origin.***