



3347 Eagle Run Drive, NE Suite B
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UMFMichigan.org

DOCTOR OF MINISTRY
VERIFICATION OF ENROLLMENT FORM

PART ONE - TO BE COMPLETED BY THE STUDENT

After classes have started for the FALL SEMESTER/QUARTER, present this form to the Registrar for the verification of your enrollment. IT IS YOUR RESPONSIBILITY TO DELIVER THIS FORM TO OUR OFFICE AT THE ABOVE ADDRESS BY OCTOBER 1st. If possible, you should wait for the Registrar to complete the form and mail it to our office yourself. We must have this form in our office before we can disburse your award. Your scholarship check will be mailed to Student Accounts Receivable at the seminary by November 1st.

Student's Name (please print) Social Security Number

Permanent Mailing Address
Street Address/P.O. Box City State Zip

E-mail Address Phone

I authorize School Name to release to the United Methodist

Foundation of Michigan, all information requested below.

Student's Signature Date

PART TWO - TO BE COMPLETED BY THE REGISTRAR'S OFFICE

The above student has been awarded a scholarship from the United Methodist Foundation of Michigan. Part Two of this form should be completed by the Registrar's Office verifying the student's enrollment for the Fall Semester/Quarter. In order for our office to have time to process the disbursement, verification of the student's enrollment must be received at the address above BY OCTOBER 1st. Electronic, faxed and/or photocopies of the data will not be accepted.

Student's Name (please print) is enrolled in the Doctor of Ministry degree program for the Fall Semester/Quarter.

Signed Date

Title School Name

Phone E-mail Address

