

**American Baptist Financial Aid Program  
Seminarian Support Program**

*Office Use Only*  
Church Pin \_\_\_\_\_  
Region \_\_\_\_\_

**Remittance Form  
for  
2016-2017**

*Please complete a remittance form for each payment you send to the seminary for the Seminarian Support Program.  
Request additional funds by calling 1-800-ABC-3USA, extension 2067*

The name of the church, region, or association remitting these funds \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Treasurer's name and telephone number \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Name Area Code Number

Pastor's name \_\_\_\_\_

Attached is our check # \_\_\_\_\_ dated \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. This check is a partial payment of our  
pledge \_\_\_\_\_. This check is payment in full of our pledge \_\_\_\_\_. Please credit this payment to the account of:

Student's name \_\_\_\_\_

Student's home address \_\_\_\_\_  
Street City State Zip

Name of student's home church \_\_\_\_\_  
Name City State

Student is/will be attending \_\_\_\_\_ Anticipated graduation \_\_\_\_\_  
Seminary name Date

Signature of church, region or association official \_\_\_\_\_  
Signature Date

**Mail this form to the Financial Aid Office at the appropriate seminary. Use the address listed below.**

*American Baptist Seminary of the West*  
2606 Dwight Way  
Berkeley, CA 94704-3029  
510-841-1905  
[www.absw.edu](http://www.absw.edu)

*Evangelical Seminary of Puerto Rico*  
776 Ponce de Leon Avenue  
San Juan, PR 00925-2207  
787-763-6700  
[www.se-pr.org](http://www.se-pr.org)

*The Samuel DeWitt Proctor  
School of Theology  
Virginia Union University*  
1500 Lombardy Street  
Richmond, VA 23220-1622  
804-257-5715  
[www.vuu.edu/theology](http://www.vuu.edu/theology)

*Andover Newton Theological School*  
210 Herrick Road  
Newton Center, MA 02459-2219  
617-964-1100  
[www.ants.edu](http://www.ants.edu)

*Morehouse School of Religion*  
645 Beckwith Street SW  
Atlanta, GA 30314-4112  
404-527-7700  
[www.itc.edu](http://www.itc.edu)

*Shaw University  
Divinity School*  
PO Box 2090  
Raleigh, NC 27602-2090  
919-546-8300  
[www.shawuniversity.edu/divinityschool](http://www.shawuniversity.edu/divinityschool)

*Central Baptist Theological Seminary*  
6601 Monticello Road  
Shawnee, KS 66226-3513  
9130-677-5700  
[www.cbts.edu](http://www.cbts.edu)

*Northern Seminary*  
660 E. Butterfield Road  
Lombard, IL 60148-5698  
630-620-2100  
[www.seminary.edu](http://www.seminary.edu)

*Colgate Rochester Crozer Divinity School*  
1100 S. Goodman Street  
Rochester, NY 14620-2589  
585-271-1320  
[www.crcds.edu](http://www.crcds.edu)

*Palmer Theological Seminary  
The Seminary of Eastern University*  
6 E. Lancaster Ave.  
Wynnewood, PA 19096  
610-896-5000  
[www.seminary.edu](http://www.seminary.edu)

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Seminarian Support Program**

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Church Pin \_\_\_\_\_  
Region \_\_\_\_\_

**Pledge Form  
for  
2016-2017**

*Use one form per student. Request additional forms by calling 1-800-ABC-3USA, extension 2067*

The church, region, or association pledging support for the student listed below is:

Name of church, region or association \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Treasurer's name and telephone number \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Name Area Code Number

Pastor's name \_\_\_\_\_

Our pledge for the academic year 2016-2017 is in the amount of \$1,000, \$750, \$500, \$250, or other \$ \_\_\_\_\_  
(Please circle one) Amount

Student's name \_\_\_\_\_

Student's home address \_\_\_\_\_  
Street City State Zip

Name of student's home church \_\_\_\_\_  
Name City State

Student is/will be attending \_\_\_\_\_ Anticipated graduation \_\_\_\_\_  
Seminary name Date

Signature of church, region or association official \_\_\_\_\_  
Signature Date

**Mail this form to the Financial Aid Office at the appropriate seminary prior to August 15, 2016. Use the address listed below.**

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