Diocesan Tuition Form - Diaconate Formation

The applicant pays entire tuition costs upfront, then submits this form for reimbursement. The Diocese will reimburse 25%, Parish 25%.

Semester and Year: (ex	x. Winter, 20	24) Course # :	Cour	se #:	
Student Information		D	ate:		
ast Name: First N		ame: Prefix:			
Address:	City, Zip:				
Phone:	🗆 H	ome □ Work □ Ce	ell		
Email Address:					
Parish Name:		City			
Pastor (Manager) Name:					
Business Manager:		Phone #:			Email
Address:					
Academic Program Information					
University/College Name and Location	n:				
□Undergrad □Graduate Major:					
Total credit hours needed to complete th	ne progran	n36-38 Nur	nber of credits o	ompleted:	
Tuition Payment Agreement The Diocese of Lansing will provide 25% of the tuitio expense for those Diaconate Formation Program	e tuition	Total Tuition:		Date	For Office Use Check # Amount
participants who are meeting the requirementhe Ministry Formation Program.	nts of	Parish Total:			
The <i>recommended</i> tuition split is Parish—25' Student—50%, Diocese—25%.	, ,	Student Total:			
		Diocesan Total:			
As the Parish representative , I agree to pay th	ne parish co	ntribution listed in t	the Tuition Payme	ent Agreement	above.
Signature		Date			
As the student , I agree to pay the tuition indica	ated in the	Tuition Payment Ag	reement above. I	also realize tha	at it is my
responsibility to make sure that all tuition pay	ments are ι	up to date on my acc	count.		
Signature		Date			
<u>Directions:</u> Send this COMPLETED FORM with payment Diaconate Formation Tuition Subsidy, L			th Walnut, Lans	ing, MI 48933	3
All Students: Pay the University or Colle Diaconate Formation Office, for tuition		•	tuition payment		request to the August 2024

For more information contact Denise Dell'Acqua at ddellacqua@dioceseoflansing.org