

## **Office of Diaconal Formation**

### **Criteria for Reimbursement of Tuition through the Diocesan Tuition Subsidy program**

Before initiating academic coursework, the inquirer must meet with and get approval from his pastor and he must meet with the Director or Associate Director of Diaconal Formation.

Ongoing approval for inquirers\*, aspirants\*\* or candidates\*\*\* to enroll in classes is assumed unless communicated otherwise by the pastor or the Director of Diaconal Formation.

Diocesan reimbursement is offered after successfully completing the class with no less than a grade of B- (exceptions on grade performance due to extenuating circumstances can be reviewed by the Director of Diaconal Formation) and submission of the required documents.

***Diocesan reimbursement is 25% of the tuition fee and subject to availability of funds per the budget year.***

\*An inquirer is a man who is discerning the diaconate and has not entered the aspirancy stage.

\*\*An aspirant is a man who has been accepted into the two-year phase of formation as an aspirant.

\*\*\*A candidate is a man who has completed two years of aspirancy and been accepted as a candidate for ordination.

## 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. Winter, 2024) Course #: \_\_\_\_\_ Course #: \_\_\_\_\_

### Student Information

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Prefix: \_\_\_\_\_

Address: \_\_\_\_\_ City, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ ☐ Home ☐ Work ☐ Cell

Email Address: \_\_\_\_\_

Parish Name: \_\_\_\_\_ City \_\_\_\_\_

Pastor (Manager) Name: \_\_\_\_\_

Business Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

### Academic Program Information

University/College Name and Location:

☐ Undergrad ☐ Graduate Major: \_\_\_\_\_

Total credit hours needed to complete the program 36-38 Number of credits completed: \_\_\_\_\_

### Tuition Payment Agreement

The Diocese of Lansing will provide 25% of the tuition expense for those in the **Diaconal Formation Program** and who meet the requirements of the program.

The *recommended* tuition split is Parish—25%, Student—50%, Diocese—25%.

Total Tuition: _____	For Office Use		
	Date	Check #	Amount
Parish Total: _____	_____	_____	_____
Student Total: _____	_____	_____	_____
Diocesan Total: _____			

As the **Pastor**, I agree to pay the parish contribution listed in the Tuition Payment Agreement above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Directions:

Send this COMPLETED FORM with payment or with proof of payment to:

**Diaconate Formation Tuition Subsidy, Diocese of Lansing, 228 North Walnut, Lansing, MI 48933**

**All Students:** Pay the University or College directly. Submit proof of tuition payment and subsidy request to the Vocations Office, for tuition subsidy reimbursement.

Revised December 2025

For more information contact Denise Dell'Acqua at [ddellacqua@dioceseoflansing.org](mailto:ddellacqua@dioceseoflansing.org)