## SEMINARY DEBT REDUCTION ASSISTANCE APPLICATION FOR ROSTERED LEADERS

## RETURN BY NOVEMBER 30, 2024

I hereby submit my application for Seminary Debt Reduction Assistance. I understand that the information provided will be verified by the committee through the seminary I attended, and that all information will remain confidential within the committee.

I certify that loan amounts and payments have been identified as seminary debt or consolidated loans. If my loans have been consolidated, I have provided the most accurate calculations possible to identify the proportionate makeup of the current balance and payments related to undergraduate, seminary and other post-graduate expenses.

I have participated in the Lutheran Social Services student loan financial counseling program and have implemented the recommended strategies for management and repayment of my seminary debt.

I understand that this assistance is provided as an interest-free loan on behalf of the South Dakota Synod ELCA in recognition and appreciation for my ministry with the hope that my call to serve in South Dakota is long and blessed. If I continue to serve as an active rostered leader in the South Dakota Synod ELCA through December 31, 2025, this loan will be forgiven.

NAME:				
	STATE: ZIP:			
SEMINARY/THEOLOGICAL SCHOOL:				
SEMINARY ADDRESS:				
	YEAR OF CALL TO SD SYNOD:			
TOTAL CURRENT <b>SEMINARY/THEOLOGICAL SCHOOL</b> LOAN BALANCE: \$				
TOTAL <b>CONSOLIDATED</b> LOAN BALANCE (IF APPLICABLE): \$				

Please provide information for each loan on the following pages:

## Loan 1:

LOAN NO	MONTHLY PAYMENT: \$	BALANCE: \$
NAME LISTED ON LO	AN:	
	NAME:	
ADDRESS:		
	ck one): Federal Direct Loan ducation Loan Private Loan _	
regarding the portion	olidation Loan? YES NO ons of the loan attributed to undergr n:	aduate, seminary and post-
If "yes," what is your Have you made ap	ven Repayment Plan? YES _ next annual re-enrollment date? plication for Public Service Loan For	giveness? YES NO
Loan 2:		
LOAN NO	MONTHLY PAYMENT: \$	BALANCE: \$
NAME LISTED ON LO	AN:	
LENDING AGENCY N	NAME:	
ADDRESS:		
	ck one): Federal Direct Loan ducation Loan Private Loan _	
regarding the portion	olidation Loan? YES NO ons of the loan attributed to undergr n:	aduate, seminary and post-
If "yes," what is your	ven Repayment Plan? YES _ next annual re-enrollment date? plication for Public Servant Loan For	

Loan 3:		
LOAN NO	MONTHLY PAYMENT: \$	BALANCE: \$
NAME LISTED ON LOAN:		
LENDING AGENCY NAME:		
ADDRESS:		
TYPE OF LOAN (check one Federal Family Education	): Federal Direct Loan n Loan Private Loan _	Federal Perkins Loan Other:
regarding the portions of the	on Loan? YES NC ne loan attributed to undergro	
	payment Plan? YES nnual re-enrollment date?	
	on for Public Service Loan Forg	giveness? YES NO
Additional Information:		
SIGNED:		DATE:

NOTE: This is a fillable PDF form. Please complete and return via SECURE email to debt-reduction@sdsynod.org; or mail to South Dakota Synod, ELCA, Attention: Sem. Debt Committee, Augustana University, 2001 S. Summit Ave., Sioux Falls, SD 57197; or fax to 605.274.4028 by November 4, 2024. Questions? Call 605.274.5030.