Course of Study Scholarship Application

Rev.12/2025

COS scholarship requests are processed approximately every quarter. This application should only be submitted after successful completion of one or more course of study or advanced course of study classes. If necessary, an applicant can submit more than one application throughout the year. A request will not be paid if submitted more than nine (9) months following the completion of the course. Including the time needed for processing the check request and mail delivery, note that it can take up to 4-6 weeks after a request is submitted before the check is received.

Personal Information

First Name	**Last Name**	
Address	**City/State**	**Zip Code**
Phone Number	**Email Address**	

General Information

Are you a certified candidate? _____Yes _____ No

I am currently serving a local church in the Great Plains Conference: _____Yes _____ No

If so, what church are you serving? _____

School Attended for Course of Study:		
Name of Class(es) Attended	**Date of Class(es) Attended**	**Tuition Cost**
Total cost of books:		
Total amount requested for reimbursement including tuition, books & fees:		

<u>Please attach a copy of your registration and a summary of your total costs for tuition/books/lodging/travel, separating costs out for each class and attach all receipts. When submitting travel, submit your number of miles</u>. Mileage rate will be calculated by NUMF staff.

The Board of Ordained Ministry of the Great Plains Conference has COS grants available. Have you requested any financial assistance at the conference level? _____Yes _____No

By selecting 'Yes', you certify that you are not being reimbursed for any of these expenses from any other source. _____Yes _____No

By selecting 'Yes', you certify that you plan to serve in the Great Plains Annual Conference of the United Methodist Church at the completion of the course of study or advanced course of study.
_____Yes _____No

****If this is your first time submitting a course of study application, please attach a one-page Call to Ministry Statement.**

_____ _____

Signature of Applicant ***Date***

Mail this application with requested documentation to the following address:
Nebraska United Methodist Foundation, 100 W Fletcher Ave., Ste. 100, Lincoln, NE 68521 | Questions: Call 402-323-8844 or email sschmidt@numf.org.

For office use only:
Approved date: _____ Check #: _____ Date mailed: _____

Signature Executive Director: _____

Signature Director of Stewardship: _____