SAF "Partners in Ministry" Recipient Application

IMMANUEL LUTHERAN HIGH SCHOOL, COLLEGE, AND SEMINARY

Overview of the Program

The SAF "Partners in Ministry" (PiM) program is designed to link active CLC called servants, who have obligations to repay ILC Student Aid Fund loans, with donors who agree to provide matching funds for payments on those loans.

Eligibility for the Program Benefits – The program is open to applicants who:

- are on the CLC roster of public servants of the Word (pastors, professors, and teachers);
- are currently serving under a regular Call;
- are repaying SAF loan balances for themselves, and/or are the responsible party for their children who have attended ILHS.

Implementation of the Program

- Called servants may apply for the PiM program benefits by contacting the ILC Business Manager or the Chairman of the Board of Regents, using this application.
- PiM donors agree to match, dollar for dollar, repayments to the SAF loan of the called servant whom they are sponsoring, up to the limit the donor has specified. The matching funds will be applied directly to the SAF loan principal balance semi-annually. These payments are voluntary and not guaranteed.
- PiM called servants and donors will be anonymous to each other.
- PiM donors will be informed of the total SAF loan they may be called upon to share before committing to the program, and may opt out of the program at any time.

Please fill out the form below and return to the ILC Business Manager

Your Name:	
Call you are serving:	
Home Address:	
City/State/Zip:	
Phone, Cell #:	
Email:	

This application is for: \Box	My own SAF balance in the amoun	t of: \$	
	My children's SAF balance in the a		
	onthly payment amount stated on ye		
If you are applying for payment whom <u>you</u> are responsible for	nts to your children's accounts, not payment.	e that they must be II	LHS alumni for
Student(s) Information:	Attended (Year	s) (Loan \$\$)	(Pmt/Mon)
Student Name:	ILHS fromto_	\$	
Student Name:	ILHS fromto_	\$	
Student Name:	ILHS fromto_	\$	
Family Financial Data State	ment:		
HOUSEHOLD INCOME of the	ne person(s) responsible for the SA	F loan repayment:	
Adjusted Gross Income from	n current IRS form 1040, line 37, o	r 1040EZ_line_4_\$	
	a current IRS form 1040 - line 6d	1 10 10L2, IIIC 1 \$	
	Please submit pages 1-2 only of you	r last 1040)	
In a separate letter, you ma	y list any extraordinary financial si	tuation you wish to h	ave considered.
Signad		Data	
Person respons	ible for SAF loan repayment	Date:	
Send application to:	General Business Office Immanuel Lutheran Colleg 501 Grover Road Eau Claire, WI 54701-713		
	vill be notified by the ILC Busines Ministry donor is found to co-pay	s Manager if a	
	If you have any questions please	contact:	
ILC Business M	Manager Steve Lentz (715) 836-66	22 or steve.lentz@ilc	.edu
ILC Board of Regents	or s Chairman John Hein (612) 408-10	635 or jphein@clclut	heran.com
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