

## **Section 1: Student Agreement**

I understand that as a child (under the age of 30 y	ears) of a currently serving, full-time or emeritus IMB or NAMB
missionary, I may be eligible for the MK Grant de	uring my first four years of study at The Southern Baptist Theological
Seminary or Boyce College as an undergraduate of	or master's-level student. I am applying to receive the grant beginning in
(semester/term) of	(year). I understand that I must be enrolled as a full-time student in
order to receive the grant and that online education	on is not included.
Name of Student	Signature of Student
6-Digit Student ID	Date
Section 2: IMB/NAMB Representati	ve Affirmation
This is to certify that	(Name of Employee), parent of
	(Name of Student), is currently endorsed by or a full-time
employee of	(Mission Organization). He/she began employment or
was endorsed on	(Date of Employment/Endorsement).
Name of IMB/NAMB Representative	Signature of IMB/NAMB Representative
Title	Date
Section 3: For SBTS Financial Aid O	Office Only
Student GPA:	Discount Type:
Student Degree:	Tuition Type:
Missions Grant: ☐ Approved ☐ Denied	
Effective Date:	
Financial Aid Representative Signature	