

## Financial Responsibility Statement: Course of Study School 2011

**This form should accompany your application/registration form**

I \_\_\_\_\_ **GETS ID #** \_\_\_\_\_  
Student's printed name

**understand that I am responsible for all costs incurred as a student in COS. I understand that payment in full is due at check-in.** Unpaid balances from previous years will result in my being refused admission to the COS program.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**I will pay in the following manner:**

\_\_\_\_\_ I will pay all my own expenses.

\_\_\_\_\_ Some portion of my expenses will be paid by the parties listed below.

\_\_\_\_\_ All my expenses will be paid by the parties listed below.

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\_\_\_\_\_ **Annual Conference**

The Board of Ordained Ministry of \_\_\_\_\_ Annual Conference  
will be responsible for \$ \_\_\_\_\_ or \_\_\_\_\_ % per session.

Name of Conference LP Registrar\* (Print) \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

x \_\_\_\_\_ Fax no. \_\_\_\_\_

Signature\* Conference Local Pastor Registrar & Date

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\_\_\_\_\_ **District** \_\_\_\_\_ **Local Congregation** \_\_\_\_\_ **Other:** \_\_\_\_\_ **(Please be specific)**

(District or UMC name) \_\_\_\_\_ will be responsible for  
\$ \_\_\_\_\_ or \_\_\_\_\_ % per session.

Name of responsible party \* (Print) \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

x \_\_\_\_\_ Fax no. \_\_\_\_\_

Signature of \*responsible party & Date

\*This signature denotes a commitment to be responsible for any outstanding balance of the student up to noted amount

**Deadline for this Financial Responsibility form is May 28, 2011**

**Full payment is required at check in. All costs related to Course of Study School will be billed directly to the student and no grades will be released in case of unpaid balance. You may send this form in separately from the course registration form, but your application will not be considered complete without it.**

**G-ETS accepts Visa, Mastercard, Discover and American Express.**

**If paying by check- make it payable to G-ETS Course of Study School.**

**Send this form and payment to:**

Garrett-Evangelical Theological Seminary  
Course of Study School  
2121 Sheridan Rd., Evanston, IL 60201

**Note:** The student is responsible to forward the statement/bill to the responsible parties who signed this form. You might need to make copies. Keep a copy for yourself.