



HERITAGE THEOLOGICAL SEMINARY ALUMNI BURSARY AUTHORIZATION FORM

50% OFF ONE AUDIT COURSE PER SCHOOL YEAR PERMITTED PER HERITAGE SEMINARY DEGREE GRADUATE

NOTE: Students are responsible for payment of any other additional course fees (ie. textbooks).

| | |
|---------------------------------------|--|
| DATE: | |
| GRADUATE FULL NAME: | |
| FULL ADDRESS: | |
| PHONE: | |
| E-MAIL: | |
| DEGREE COMPLETED: | |
| YEAR OF GRADUATION: | |
| NAME OF CHURCH / DENOMINATION: | |
| COURSE CODE: | COURSE NAME: |
| COURSE FORMAT: | 1=in person 23=synchronous/virtual on Teams 2=asynchronous |

ALUMNI BURSARY AUTHORIZATION FORM MUST BE COMPLETED AND RETURNED TO THE REGISTRAR PRIOR TO REGISTRATION FOR THE COURSE.

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|---|---------------------------------|
| | INTERNAL OFFICE USE ONLY |
| GRADUATE ELIGIBLE <input type="checkbox"/> | |
| REGISTRAR'S AUTHORIZATION _____ | DATE _____ |
| ELIGIBLE FOR DISCOUNT <input type="checkbox"/> G/L # 64035-02 | |
| FINANCE AUTHORIZATION _____ | DATE _____ |