ENSIGN COLLEGE

Dependent of a Mission President

Student's Information:

Student Name: _____ID#: _____

Phone Number: _____ Email: _____

Age: _____ Birthdate: _____

Semester: _____ GPA: _____

Father's Information:

Father's Name: _____

Name of Mission: _____

Please agree to all the following before signing:

Children of current Mission Presidents may receive educational reimbursement for tuition at Church-owned schools with the following terms:

- ☐ Must be under age 26 and not married at the beginning of the school term.
- ☐ Applicable only to undergraduate classes and single student insurance premiums.
- ☐ Books and other school related fees (such as course content charges) are the responsibility of the student.
- ☐ School term must start after the beginning of the President's mission term of service and before the end date of the mission term of service.
- ☐ Must earn credits in order for the tuition to be paid by the church.

Insurance:

- ☐ I have my own health insurance and have submitted or will submit a waiver.
- ☐ I require Ensign College's Student Health Insurance.
- ☐ I am not taking sufficient credit hours (under 9) to qualify for insurance.

Student Signature: _____ Date: _____

For Office Use Only:

Status Verified: _____ Posted: _____