



Application For Grace Payment Plan

Your Name: _____

The Name of Your Church or Ministry: _____

Your Mailing Address: _____

Your Phone Number: _____

Your Monthly Household Income: _____

Degree Plan You Wish to Pursue: _____

*Amount of Your Down Payment: _____

Amount You Are Requesting to Pay Monthly: _____

*Note: Although we do not have a set Monthly Payment, we require that the Down Payment be \$200.00 and The Monthly Payment be \$25.00 or more each month.

**Note 2: Your Diploma we not be sent to you until you have paid in full, even if you have completed your courses.

***Note 3: We do not normally refund your payments if you are unable complete your payments.