



FLORIDA BIBLE COLLEGE OF TAMPA

4811 George Road, Tampa FL 33634
813-884-8182

Application for Financial Assistance

Applicant: _____

Date submitted: _____

Semester entering or returning to Florida Bible College of Tampa Fall Spring 20_____

Please describe your plan to meet the financial requirements of attending Florida Bible College. Include (as appropriate) description of *available* funds from personal savings and assets, family savings and assets, current and anticipated earnings, other existing financial obligations, and expected or hoped-for financial assistance (be as specific as possible).

This information will be kept in strictest confidence, and is only used to help determine possible financial assistance.

Personal Savings: _____

Personal assets (which can be liquidated – sold) and value: _____

Family/church assistance expected: _____

Earnings from current Employment: _____

Anticipated earnings from school-year employment (if known): _____

Existing financial obligations to others (not Florida Bible College of Tampa):

Expected or hoped-for financial assistance: _____

“I would like to be considered for financial assistance from Florida Bible College of Tampa.”

Print Name: _____ Sign and Date: _____

From the CATALOG: “*Registration* obligates the student for full payment of tuition and semester fees. If a student is unable to pay the tuition in full at the time of registration, he must pay a minimum FIRST PAYMENT during the first week of classes, and *may* make “deferred payments” to pay the balance over the course of the semester. This choice incurs a **deferred payment fee** of \$100 (or 10%, whichever is less). Regular payments on the student’s account will be scheduled at Registration, so that the balance is paid in full prior to the final exam date for the semester.”