



## DECLARATION OF INTENT TO ENTER PROFESSIONAL CHURCH WORK MINISTRY 2019-2020

### Student

The Declaration of Professional Intent is filed annually by students who are preparing for service in LCMS Church Work and who wish to be considered for financial aid for that purpose. This completed form is to be submitted to the Office of Student Financial Services at Concordia University Texas.

**Student ID:** B00\_\_\_\_\_

**Check One:** \_\_\_\_\_ Lutheran Teacher      \_\_\_\_\_ Pre-Seminary Program  
                   \_\_\_\_\_ Music Ministry Program      \_\_\_\_\_ Director of Christian Education (DCE)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_      **E-mail Address:** \_\_\_\_\_

**Home Congregation:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Pastor:** \_\_\_\_\_

After prayerful consideration, I hereby declare my intent to enter the ministry of the Lutheran Church-Missouri Synod upon completion of my formal studies and requirements at Concordia University Texas. I have discussed this commitment with my admission advisor (new students) or faculty adviser (continuing students) and my home pastor, and I am aware of the necessary dedication involved in this decision.

If, at any time, my major should change, I will immediately give written notification to the director of my church work program and provide a copy to the Student Financial Services Office.

**Student's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Pastor

I have discussed with the aforementioned student the Declaration of Professional Intent and certify that the student is a member in good standing in my LCMS congregation.

**Pastor's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Our congregation  **will**  **will not** be able to provide financial assistance for this student.

(Approximate amount per year \$ \_\_\_\_\_)

### PLEASE RETURN THE COMPLETED FORM TO:

**Student Financial Services**  
 11400 Concordia University Drive  
 Austin, TX 78726-4141

**Student Central Phone: 1.512.313.4700**  
**Student Financial Services Fax: 1.512.313.1670**  
**Email: [financialaid@concordia.edu](mailto:financialaid@concordia.edu)**