

FACULTY DEVELOPMENT FORM FOR CANCELLATION or DEFERMENT ANNUAL FORM

(after graduation or termination of doctoral program or terminal degree program)

Division of Education & Clergy Development - P.O. Box 50434, Indianapolis, Indiana 46250-0434 - (317) 774-3914

Name _____ Email _____ Date _____
(Please Print)

Address _____
Street City State/Province Postal Code

Complete information in **ONE** of the following three boxes--

1. I request 50% **CANCELLATION** for my faculty/administrator appointment at a Wesleyan Educational Institution for 20____-20____.

I was employed full-time with faculty status and served in the capacity of _____
position
_____ at _____ Wesleyan Educational Institution for the entire academic year.
position

My appointment for 20____-20____ is: _____ at _____
Position Wesleyan Educational Institution

2. I request 50% **CANCELLATION** of my Faculty Development Loan/Grant. I have completed my terminal degree and have made applications to serve in three or more Wesleyan educational institutions. I did not receive an offer of full-time employment this year.

Please check box

3. I request a one-year **DEFERMENT** of payment on the principal of my loan/grant obligation to The Wesleyan Church for one of the following reasons (check one, explain situation):

____1.) I plan to take an appointment in a Wesleyan Educational Institution in a year or two.
____2.) I am still in school but no longer intend to serve in The Wesleyan Church.
____3.) Specific circumstances make it impossible to make payments on principal for this year.

Briefly explain your situation:

I understand this form is required from me annually by the Div. of Education & Clergy Development once I graduate or terminate my doctoral studies until my loan/grant is satisfied in full. The form can be found at www.wesleyan.org/em under "Faculty Development."

_____ (Signature) Phone #: _____

My address for the coming year will be: _____