



FIELD EDUCATION

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OFFICE OF FIELD EDUCATION
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Director of Field Education and Contextual Learning

CONCURRENT FIELD EDUCATION SUPPLEMENTAL STIPEND APPLICATION FOR 2016-17

Some money is available for students in **Concurrent** Field Education Placements that have limited or no resources. As these Stipend Supplements are intended to be **matching grants**, we urge congregations and agencies to fund placements as best as they are able.

Students in **placements offering less than \$400/month** may apply to us for assistance.

Please keep in mind:

- ◆ Due to limited resources, **financial support is not guaranteed.**
- ◆ Compliant with IRS regulations, stipend is **paid as independent contractor wages (1099-Misc) and subject to taxes.**
- ◆ Stipends are awarded **after** the Placement has been negotiated & confirmed. If you are still negotiating with your site, submit this application before the deadline and get your Placement Confirmation Form in as soon as possible.
- ◆ **An award cannot be made until we have received the Placement Confirmation Form.**
- ◆ Late requests will be considered **only** if additional money becomes available.

APPLICATION DEADLINE IS END OF APRIL.

You will be notified before the end of the semester.

Please complete **IN FULL** the following information

STUDENT INFORMATION

Legal Name: _____ (for issuance of checks)

Preferred Name: _____

PSR Box # or Mailing Address: _____

Cell Phone: _____ PSR E-Mail: _____

PLACEMENT INFORMATION CONT'D ON REVERSE

Placement Name: _____

Mentor's Name: _____

Mentor's Phone: _____ E-Mail: _____

Monthly Amount Given by Placement: _____

Be sure to complete questions on other side. Request is not complete without this information.

Please describe your circumstances for applying.

Include your financial need, Placement's capacity to contribute, any extenuating circumstances, etc.

PLEASE CHECK THE STATEMENT BELOW, THEN SIGN AND DATE:

___ The Field Education Office has received my Placement Confirmation Form signed by the Placement Mentor.

Your Signature: _____ Date: _____