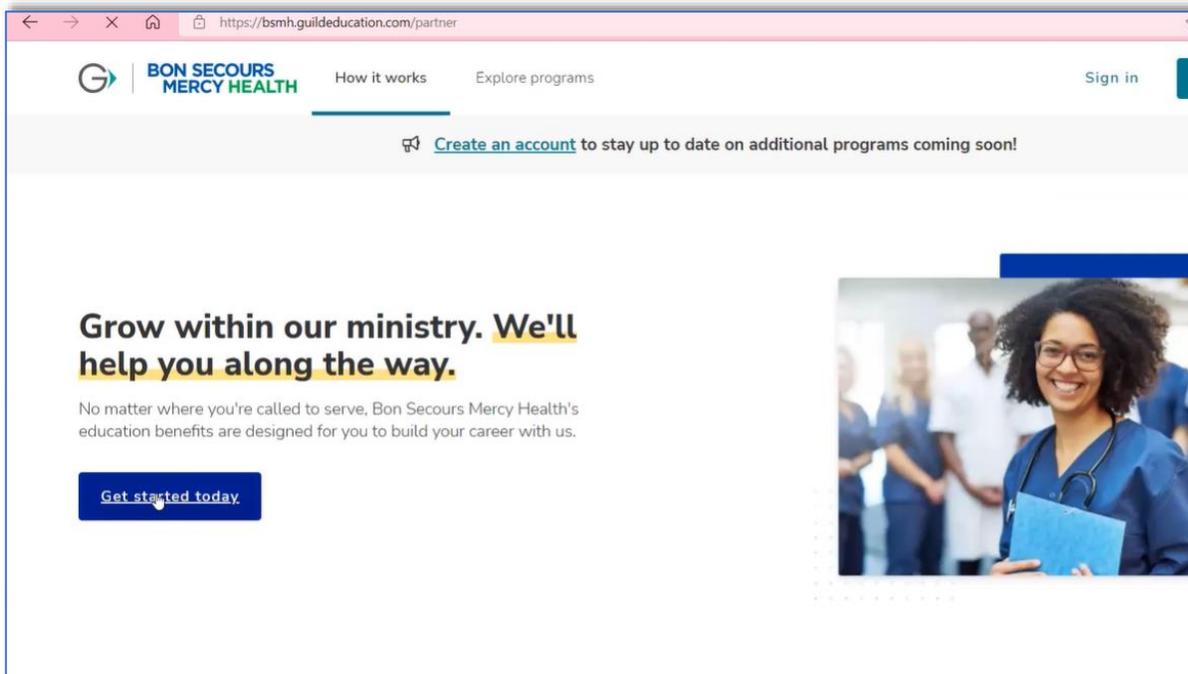


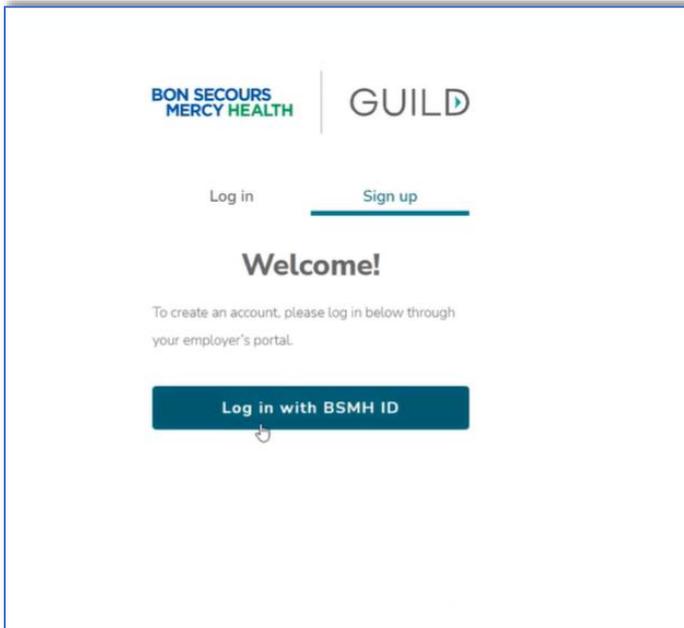
How to Apply for the BSMH Tuition Benefit through Guild Education For Students Already Enrolled in a Ministry College

1. The Guild application opens 45 days prior to the start of each semester. You will need the following information:
 - a. Your BSMH username and password (BSMH ID). These are the same credentials used to sign into Workday and BSMH computers.
 - b. Two factor authentication set up on your phone. To set up: Download VIP Access to your smart phone from the app store. Then call BSMH IT to register the app at 833-691-4357.
 - c. Term start and end dates for the semester you are applying. This information is on the Academic Calendar, check your college's website.
 - d. Your expected graduation date. You can find this in your Student Portal under Degree Audit.

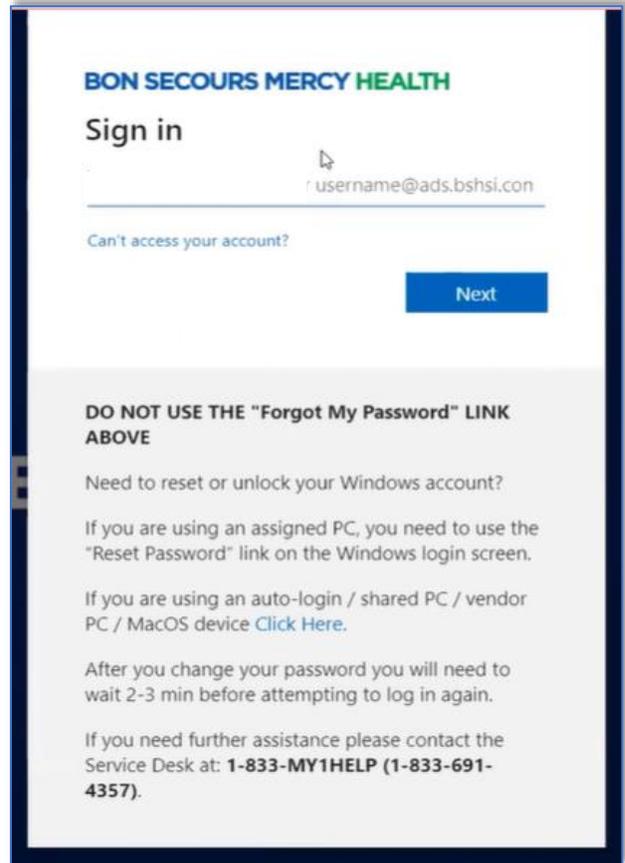
2. To begin the application, go to bsmh.guildeducation.com and select **[Get started today]**



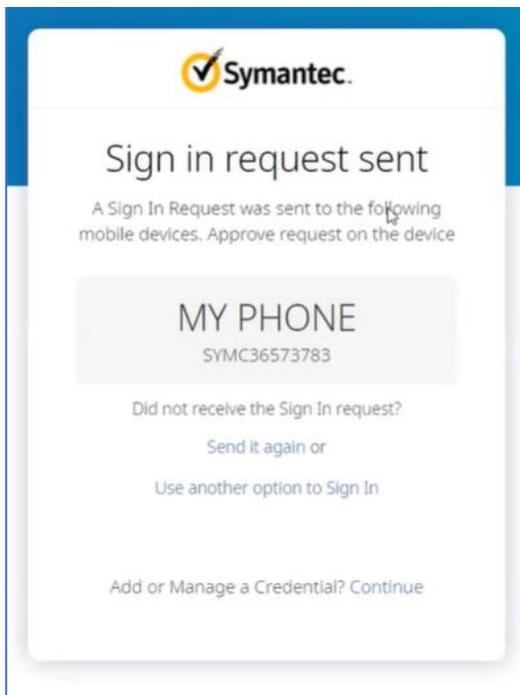
3. Select [Login with BSMH ID]



4. Sign in with your BSMH ID – **username@ads.bshsi.com**
*A default email may pop up, change it to your ads email
**username* and password are the same as what you use to log into Workday and BSMH computers



5. You will receive a sign in request to your smartphone
*You must have VIP Access set up on your phone – see page 1 for instructions



6. Select **[Get started]**

**BON SECOURS
MERCY HEALTH**

Let's set up your account

Go back to school for less. To get started, create an account.

Your education benefit

Get started

7. Enter your name, non-work email, and state, then select **[Next]**

bout_you

Getting in touch

* Required

Provide your name - just as you write it every day - a non-work email address and the state where you live.

First name *

Last name *

Non-work email *

State *

Virginia

Previous **Next**

8. Enter your phone number, then select **[Next]**

Your phone number

* Required

Guild will keep your contact information private. We'll only call you if you need support during your education journey.

Phone number *

(123) 456-7890

By entering your phone number, you agree that Guild may call or send text messages (some may be automated) with information about your educational benefits, account, enrollment-related activities, academic experience, or other information or services you request.

Previous **Next**

9. Select **[Next]**

Great!

We're glad you're here Alicia. We'd like to know a little more about you so we can better guide you on your education journey.

About you

Previous **Next**

10. Enter your current education level prior to enrollment at a ministry college, then select **[Next]**

What is your highest level of education? *

* Required

This will help us provide you the best education experience.

- Some high school
- High school diploma
- Some college
- AA degree
- BA / BS degree
- Advanced degree (Masters, PhD)

Some or all of my education was from outside the US

Previous Next

11. Select **[I am already enrolled in a university or school]**

What best describes you? *

* Required

This will help us provide you the best education experience.

- I want to go back to school, and I know what type of program, degree, or certificate I want to complete
- I want to go back to school but I'm not sure what I want to study
- I primarily want to learn or improve a language
- I'm honestly not sure about going back to school
- I am already enrolled in a university or school

12. Select **[Direct Payment Program]**

BON SECOURS MERCY HEALTH

Home Programs Applications **Direct Payment Program** More

Good morning, A [redacted]! [Edit Profile](#)

Take the next step

Guild helps students successfully enroll in academic programs that are changing their future. Join our growing number of students and graduates!

1-2 MIN

Find the right program for you.

Answer a few questions and get personalized recommendations.

[Get started](#) [Maybe later](#)

Your eligi

See if you're appro for this benefit.

Eligible

[Learn about](#)

You can ac anything

Guild Education uses cookies by default to improve your user experience and to analyze performance and ensure proper

13. Select [Apply for Sponsorship letter]

Direct Payment Program

Apply to select schools for an upcoming term to avoid paying out-of-pocket for your degree or certification.

Start the process

Bon Secours Mercy Health's Direct Payment Program is for employees enrolled or intending to enroll at a ministry-owned school:

- Mercy College of Ohio
- Bon Secours St. Mary's Hospital School of Medical Imaging
- Bon Secours Memorial College of Nursing
- Southside College of Health Sciences

With the Direct Payment Program, you apply for a sponsorship letter up to **45 days before** the start of each new term. The sponsorship letter lets your school know that Bon Secours Mercy Health will cover your tuition for the coming term, up to the amount offered for your selected program.

[Apply for Sponsorship letter](#)

Your eligibility

 Eligible for education benefit
Employee ID: 2: _____

Resources

[Direct Payment Program - How it works](#)

[Program catalog](#)

14. Select [Save and continue]

- 1 Welcome
- 2 Education
- 3 Term Dates
- 4 Agreements
- 5 Review

Welcome!

Here are a few things you need to know about the Direct Payment Program:

Bon Secours Mercy Health's Direct Payment Program is for employees who want to take programs at ministry-owned schools.

If you are taking a Nursing Associate or Bachelor's or Phlebotomy Certification program, **be sure to select the Nursing or Phlebotomy-specific program type** on the next page of this application. If you are in a Master's program, including Nursing Master's degrees, please select Master's Degree.

For more information about Bon Secours Mercy Health's requirements, eligible education expenses, and payment timelines, visit the [How it works page \(Open in new tab\)](#).

[Save and continue](#)

15a. Choose your school from the dropdown list

Welcome 1 | **2** Education | 3 Term Dates | 4 Agreements | 5 Review

Education

* Required field

School *

Choose option

- Bon Secours St. Mary's Hospital School of Medical Imaging
- Bon Secours Memorial College of Nursing
- Mercy College of Ohio
- Southside College of Health Sciences

Expected graduation date * (mm/dd/yyyy)
Tell us when you expect to complete your program.

15b. Enter the name of your program

Welcome 1 | 2 Education | **3** Term Dates | 4 Agreements | 5 Review

Education

* Required field

School *

Bon Secours St. Mary's Hospital School of Medic... X

Program name *

Program type *

For Nursing or Phlebotomy, choose that specific program type rather than the general degree or certificate type.

Tip – Choose from the options below:

BSMCON

- BS in Nursing

SOMI

- Certificate in Radiologic Technology
- AAS of Radiologic Technology

SCHS

- AAS in Nursing
- AAS in Diagnostic Medical Sonography
- AAS in Radiologic Technology

15c. Choose the appropriate program type from the dropdown menu

Welcome 1 | 2 Education | 3 Term Dates | 4 Agreements | 5 Review

Education

* Required field

School *

Your School .. X

Program name *

Your Program name

Program type *

For Nursing or Phlebotomy, choose that specific program type rather than the general degree or certificate type.

- Associate's Degree
- Bachelor's Degree
- Certification
- Master's Degree
- Nursing - Associates / Bachelors
- Phlebotomy - Certificate

Tip – Choose the option below that is associated with your program:

BSMCON

- **Nursing – Associate's Bachelors** – BS in Nursing

SOMI

- **Certificate** – Certificate in Radiologic Technology
- **Associate's Degree** - AAS of Radiologic Technology

SCHS

- **Nursing – Associate's Bachelors** – AAS in Nursing
- **Associate's Degree** - AAS in Diagnostic Medical Sonography
- **Associate's Degree** - AAS in Radiologic Technology

15d. Enter your graduation date, then select [Save and continue]

Education

* Required field

School *

Your School

Program name *

Your Program name

Program type *

For Nursing or Phlebotomy, choose that specific program type rather than the general degree or certificate type.

Your Program type

Expected graduation date * (mm/dd/yyyy)

Tell us when you expect to complete your program.

mm/dd/yyyy

Save and continue

Tip – How to find your graduation date:

1. Log into your [Student Portal](#)
2. Go to Academics>>>Degree Audit

3. Find **Exp. Grad Date** on the bottom right of the page

BON SECOURS

- Campus Info
- Online Application
- Academics
 - Registration
 - View Attendance
 - Unofficial Transcript
 - Degree Audit**
 - Your Class Schedule
 - GPA Calculator
 - Forms
 - Honor Code
- My Profile
- My Finances

Degree Progress Audit

All courses required to complete your program are listed below. Select a column heading to sort your courses by status, letter grade, or other criteria. If you have questions regarding your degree audit, please contact your advisor.

Program Details

Current Program

Program Version	Bachelor of Science in Nursing FA19	Campus	Bon Secours M of Nursing
Degree Pursued	Bachelors		
Program Version Comments	Version 1 - beginning Fall 2019		
Enrollment ID	F.....1	Status	Active
Academic Advisor	Maggie Brocklebank	Enroll Date	8/17/2020
Enrollment Cum. GPA	3.47	Start Date	8/17/2020
Overall Cum. GPA	3.47	Exp. Grad Date	12/9/2022

16. Enter term start and end dates then click [Save and continue]

Term dates

* Required field

Sponsorship funding is applied to specific terms. Let us know what term you are applying for.

Term start date * (mm/dd/yyyy)

Term end date * (mm/dd/yyyy)

Tip – Term dates for Spring 23:

- BSMCON
 - Start - 01/09/2023
 - End – 05/09/2023
- SOMI AAS
 - Start – 01/09/2023
 - End – 05/05/2023
- SOMI CERTIFICATE
 - Start – 01/03/2023
 - End – 02/24/2023
- SCHS
 - Start – 01/09/2023
 - End - 04/27/2023

17. Read the **Acknowledgement of personal responsibility** then check the box

Agreements

* Required field

Acknowledgement of personal responsibility

I understand that if my application is approved that I will be eligible to receive assistance for 100% of tuition and qualified mandatory fees, less grants and scholarships, up to my annual funding limit (some programs are fully funded). I understand that, for capped funding programs, my remaining funding amount is subject to change as my education expenses are processed and may differ from the time my application was approved to the time my school submits my bills to Guild. I understand that I am responsible to pay my school directly for any tuition, books, and fees not covered by my employer. *

18. Read the **FERPA agreement** then check the box

FERPA agreement

I authorize Guild and its subcontractors, my School, and my Employer to share information in connection with my participation in this program. Specifically, Guild may disclose to School and Employer my personal contact information and information related to services I receive from Guild, including information related to financial assistance. School may disclose to Guild and Employer information from my education records ("education records" are records that are directly related to me and maintained by School or by a party acting for School, and may include my academic history, academic progress, and the type and amount of approved financial assistance), and Employer may disclose to Guild and School relevant information related to my employment status and any employer-provided tuition assistance.

I understand that my education records at School may be protected from disclosure without my consent in accordance with the Family Educational Rights and Privacy Act, ("FERPA"). I knowingly authorize School to release information from my education records, including my personal contact information, my academic history, academic progress, and the type and amount of approved financial assistance, to Guild and Employer for the purpose of supporting my enrollment at School and as a participant in my Employer education benefit program administered by Guild.

I agree and authorize Guild Education, Inc., my Employer, and my School to release and exchange education records and other information as outlined in the stated terms *

19. Review your information for accuracy

Review

* Required field

Education [Edit](#)

College, university, or school	Expected graduation date
Bon Secours St. Mary's Hospital School of Medical Imaging	3/5/2023
Program name	Degree type
Certificate of Radiologic Technology	Certification

Term dates [Edit](#)

Term start date
5/3/2022
Term end date
8/25/2022

Agreements [Edit](#)

- FERPA agreement
- Acknowledgement of personal responsibility

20. Read the **Certification** statement, check the box, then select **[Submit]**

Certification *

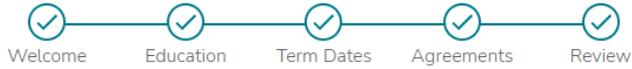
I certify that the enclosed information is accurate, truthful, and in accordance with my employer education benefit policy. Specifically, I have reviewed my Program Type selection and have selected a Nursing or Phlebotomy program type where applicable.

I understand that Guild Education reserves the right to share the details of my requests with my Employer, including, but not limited to, supporting documentation, request history, or suspicious behavior.

15 [Submit](#)

21. Congratulations your application is complete!

Sponsorship application ID: 048



You've completed your application

We'll email you with next steps in 2-3 business days.

Looking ahead

After your term ends, you'll need to upload your transcript and let us know how your courses went. We'll send you a reminder email when it's time.

What happens next?

- Guild will review your application and email you with next steps within 2-3 days.
- If approved for the benefit, Guild will email you a **Sponsorship Letter**.
- **Sign and date** the Sponsorship Letter then **email** it to your Business Office/Bursar. This is how the college knows you will be using the benefit.
 - bsr-bursar@bshsi.org (BSMCON/SOMI)
 - SCHSBilling@bshsi.org (SCHS)
- If denied for the benefit, please contact HR Associate Services to find out why. Contact them online through HR Service Now or by calling 877-692-7780.



**BON SECOURS
MERCY HEALTH**

Guild Education, Inc. ("Guild") & Bon Secours Mercy Health Sponsorship Letter

Date of Issuance August 2, 2022

STUDENT SECTION

Student Name: Sam Student
External ID:
Sponsorship Letter ID:
School: Bon Secours Memorial College of Nursing
Program: BS in Nursing
Term/Course Start Date: August 1, 2022

Tip – Make sure your Sponsorship letter says you are eligible for 100% assistance if you are in a nursing program.

The term/course start date listed above has been approved. You are eligible to receive assistance for 100% of tuition and qualified mandatory fees (less grants and scholarships). Based on your funding amount as of August 2, 2022, Guild will facilitate full payment for all tuition and qualified mandatory fees incurred as part of your approved program. You are responsible for any books or fees not covered by your employer. Please present this Sponsorship Letter to your school by emailing BSR-Bursar@bshsi.org no later than your school's payment due date.

I understand the guidelines of the program and that I am responsible for any ineligible tuition and/or fees, as well as complying with any additional requirements included in my Employer's policy, which may include financial aid requirements. If the details of this Letter is altered in any way, this Sponsorship Letter will become void.

I authorize Guild and its subcontractors, my School, and my Employer to share information in connection with my participation in this program. Specifically, Guild may disclose to School and Employer my personal contact information and information related to services I receive from Guild, including information related to financial assistance. School may disclose to Guild and Employer information from my education records ("education records" are records that are directly related to me and maintained by School or by a party acting for School, and may include my academic history, academic progress, and the type and amount of approved financial assistance), and Employer may disclose to Guild and School relevant information related to my employment status and any employer-provided tuition assistance. I understand that my education records at School may be protected from disclosure without my consent in accordance with the Family Educational Rights and Privacy Act, ("FERPA"). I knowingly authorize School to release information from my education records, including my personal contact information, my academic history, academic progress, and the type and amount of approved financial assistance, to Guild and Employer for the purpose of supporting my enrollment at School and as a participant in my Employer education benefit program administered by Guild.

Tip - Your Student ID number is issued by the college

Student ID: STS123456

Student Signature: 

Date: 8/5/2022