

# Additional support for returning applicants

LANCASTER MENNONITE CONFERENCE

## LEADERSHIP EDUCATION GRANT

Applications will be reviewed and grants awarded by the Leadership Education Grant Committee three times per year. Application deadlines are January 31, May 31, or September 30. All information submitted in the application form is confidential and reviewed only by the Leadership Education Grant Committee. *This is a shortened version of the application for those who have been awarded a leadership education grant in the recent past.*

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

Address (if changed since last application) \_\_\_\_\_

Telephone/E-mail (if changed) \_\_\_\_\_

### PROGRAM OF STUDY: For what course of study is grant requested? <sup>1</sup>

For what period of time are you requesting support? FROM \_\_\_\_\_ 20 \_\_ TO \_\_\_\_\_ 20 \_\_

How many credits or classes will you be taking during this period of time? \_\_\_\_\_

Will your study be part of a degree program?

YES: What degree are you working on? \_\_\_\_\_

How many credits or classes are required for this degree? \_\_\_\_\_

How many credits or classes have you completed? \_\_\_\_\_

NO: What course(s) will you be taking? \_\_\_\_\_

What is the end goal of your studies? \_\_\_\_\_

Institution offering the course or degree:

Bible college or Bible school \_\_\_\_\_

Seminary \_\_\_\_\_

Other (Please specify:) \_\_\_\_\_

### FINANCIAL INFORMATION

Total cost for class/semester \$ \_\_\_\_\_

Congregational commitment of assistance <sup>1</sup> \$ \_\_\_\_\_

Any other sources of assistance (i.e. district/MMA/scholarship) \$ \_\_\_\_\_

Amount of tuition contributed by applicant \$ \_\_\_\_\_

Amount of grant money you are requesting \$ \_\_\_\_\_

Explain any unusual circumstances or special situation we should be aware of when considering this application:

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<sup>1</sup> In reviewing applications, priority will be given to those that have congregational commitment to support a part of the leader's educational cost and to a leader who is currently working with a growth plan with the Leadership Development Program in the Conference.

**RECOMMENDATION:** Please attach to this application a brief, updated letter of recommendation from your pastor, bishop, mentor, or other congregational leader. It is important that this letter convey how your congregation will support you in this endeavor. **This letter must be updated at least once each calendar year.**

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Applicant)

Return application to--  
**Lancaster Mennonite Conference**  
**Leadership Education Grant Committee**  
2160 Lincoln Highway East #5  
Lancaster, PA 17602  
VERSION: NOV 2007

<i><b>For Official Use Only</b></i>	<i>(Dates)</i>
<i>Application received</i>	_____
<i>Application reviewed</i>	_____
<i>Candidate informed</i>	_____
<i>Funds released</i>	_____
<i>Amount of grant</i>	\$ _____