Penn Northeast Conference of the United Church of Christ

APPLICATION FOR CONTINUING EDUCATION ASSISTANCE FOR INDIVIDUAL PASTORS

Name _____ Date _____

Address _____

_____ Zip _____

Telephone _____ Email Address _____

Continuing Education Event Planning to Attend: _____

_____

Date(s) of the Event

_____

Brief Description of the Program for the Above Event: _____

_____

_____

Application submitted for Classification: (check one)

1 _____
2 _____
3 _____

Cost of Program:

Tuition, Room, & Board	$ _____
Travel	_____
Total	$ _____

Anticipated Share of the Above Costs by the Following:

Applicant	$ _____
Local Church	_____
Assistance Requested from PNEC	$ _____

List previous Continuing Education experiences that you attended and when attended:

Have you received continuing education funds previously? When?

_____

Applicant's Signature

Return to: Penn Northeast Conference UCC
431 Delaware Ave.
Palmerton, PA 18071-1908

FOR OFFICE USE:

Approved by: _____ Date: _____ Amount $ _____