

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)

Short Term Opportunity _____
Intermediate Term Opportunity _____
Degree Program Opportunity _____

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 \$ _____