Church Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The pastor and/or boards have identified the current need(s) in our congregation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A conference/training event designed to meet this need is (please include the dates, location & a flier if available): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How do you feel this conference will address the issues of your church? \_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who will be attending? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost breakdown:

Registration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Materials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Travel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accommodations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other (identify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will the church be contributing to the expenses of the event? \_\_\_\_\_\_\_\_\_\_\_\_

If so, how much? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant funds requested from DBU: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(continued)

**Within 2 weeks of the event**, participants must submit a synopsis of the event, including (but not limited to):

-name of speaker(s)

-topics speaker(s) covered

-how ideas presented might be used in your church setting

-when you might begin implementing the ideas

-the strengths and weaknesses of the event

-how interactions with others were (or were not) helpful

-an accounting of the actual expenses with receipts

**Six months after the event**, a final report is to be submitted that is to include:

-how the training helped your ministry (be specific, using examples)

-ideas that were tried that did not work in your setting

-if you would recommend the training to others (why or why not?)

For the reporting and for additional information that might be needed by DBU, please give the name, title and e-mail address of the contact person:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Title E-mail address

Signature of the Senior Pastor, indicating approval of the grant request:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Senior Pastor Phone

This form was completed by *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Grant requests must be received no later than 30 days before the funds are required. The form should be sent to:

Ann Kuelbs

24584 Ridgeview

Farmington Hills, MI 48336

248-477-1572

email: ann.kuelbs@sbcglobal.net