**Chelmsford Methodist Circuit**

**Training Grant Application Form**

**for Presbyters, Deacons and Church members**

**Grants will be considered on their merits for authorised training that supports the mission of the Church and is not otherwise available through the Learning Network.**

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| **Title & Name:** |  |
| **Address:** |  |
| **Telephone:** |  | **E-mail:** |  |
| **Circuit:** |  | **Office held:** |  |

|  |  |
| --- | --- |
| **Title of training course or event you wish to attend:****Online or face to face?** |  |
| **Is the course a regular event? How frequent?** |  |
| **Why do you consider this course is important to support your role in the Methodist Church?** |  |
| **Name of provider:** |  |
| **Duration:** |  |
| **Accommodation:** |  |
| **Dates:** |  |
| **Total Cost:** |  |
| **Grant sought from circuit if not 100%:** |  |
| **Other sources of Funding:** | Connexion: £District:£ |
| **In what ways do you expect this course or event to equip you for ordained/lay ministry and make you more effective in the particular role you exercise in the life of the Methodist Church?****Please state which objectives in the Church or Circuit Mission plan are relevant to this training.** |
| **Any other comments to support the application:** |

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| ***Applicant’s Signature:*** |  | ***Date:*** |

**I confirm that I support this application for a training grant from the Circuit training fund:**

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| --- | --- | --- |
| ***Name of Minister in pastoral responsibility:*** | ***Signature:*** | ***Date:*** |

When completed, the form should be sent by email to the Circuit Administrator at karen.murrell@chelmsfordcircuit.org.uk distribution to the Circuit Grants Committee .