Application for the Individual Grant Synod of Mid Atlantic Presbyterian Women in the Presbyterian Church (U.S.A.) Leadership Development Program

Application deadline for Churchwide Gathering scholarships is May 15, 2024.

Please type or print information on this application. Applications must be received **30 days** prior to need for consideration. Attach letter of endorsement complete with senders' contact information. Incomplete applications will not be considered.



Presbyterian Women Purpose

Forgiven and freed by God in Jesus Christ, and empowered by the Holy Spirit, we commit ourselves:

- to nurture our faith through prayer and Bible study,
- to support the mission of the church worldwide,
- to work for justice and peace,
- and to build an inclusive, caring community of women that • strengthens the Presbyterian Church (U.S.A.) and witnesses to the promise of God's kingdom.

This reimbursable grant—up to a maximum funding of \$500, is intended to provide financial assistance to women residing in the Synod of the Mid-Atlantic who are active in the PC(USA) to participate in the work of Presbyterian Women for personal leadership development. If a woman previously was awarded a grant from Presbyterian Women, at least two years (24 months) must have passed since compliant closing of the previous grant. Application for this grant can be made by women who meet these criteria below.

Name:		Email address:		
Mailing address:				
Home phone:	Cell phone:	Work phone:		
Have you previously receive	ed a PW grant? y	ves 🗌 no 🗌 If yes, amount	and date	
What were grant funds used	d for?			
Are you an active member o	of the Presbyteria	an Church (U.S.A.)? yes 🗌 no		
Name of Church:				
Presbytery:		Synod: Mid-Atlantic		

Are you currently serving as a PW leader in your:

Church: yes 🗌 no 📄 Presbytery: yes 📄 no 📄 Synod: yes 📄 no 📄 Churchwide: yes 📄 no 📄

For the following questions, be specific and use additional space as needed.

Please describe your role(s) and dates of service.

What is the event that you are planning to attend?

Date of this event?

Why do you want to attend this event?

What will you do with the training you receive at this event and share your experience with PW and/or other groups in your area? Please describe your plan.

Cost of Event

Registration \$	Travel \$	Housing \$	Meals \$	Total: \$

What other sources of funding have you pursued and/or received?

Source	Date Requested	Amount Requested	Amount Received

Within thirty (30) days of event completion, all receipts and paperwork must be received by the Synod PW Treasurer. No reimbursement receipts will be accepted or reimbursed after that time. Your signature here verifies that you have read and understand this statement.

Applicant Signature	Date:
	Dute.

Witness Signature_____

Date:

Please send or email this form with the letter of endorsement to Pam Snyder, Synod PW Leadership Grant Program, at <u>pamsnyder1063@gmail.com</u> or at 245 Wayt Street, Staunton, VA 24401

	For C	Office Use Only		
Date application receive	d:	Ву:		
Grant # A	ssigned by:		Date:	
Date application forward *Attach	led to committee for rev a copy of sent email show		Ву:	
Date application approve	ed by committee:			
*Attach	copy of sent email show	ing all recipients		
Amount approved \$	(Maximum \$500	or amount approved	on application)	
Date check mailed:				

*Attach copy of signed check