Wolverhampton and Shrewsbury District Training Grant Application

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| **Name:** |
| **Address:** |
| **Church/Circuit:****Position:** |
| **Contact details: email** **tel.** |
| **Training course / event for which grant is requested:****Date:****Location:** |
| **Has the idea of attending this training arisen as part of your MDR reflections?****(if appropriate)** |
| **Costs Funding Sources**Event £ Own funds £Travel £ Church/Circuit £Other costs…. £ Other £ **Grant Required £**Total £ Total £ |

**Please answer the following questions**: (expand the boxes to suit your text)

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| **Thinking about the four aspects of Our Calling, how will this training help you and the Church grow in areas of -** **worship****learning and caring****service****evangelism** |
| **2. Has this been discussed with the circuit? Yes / No If so, what are the Circuit’s comments** |
| **3. Please give brief details of any other grant support you have received from the District in the last three years:** |

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| **Please complete and return to District Office** **admin@wsmethodist.org.uk** |