# 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**](mailto:admin@wsmethodist.org.uk) |