

**Presbytery of Great Rivers**  
**CONTINUING EDUCATION GRANT APPLICATION**

Updated March 2025

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

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Present position: \_\_\_\_\_

For what specific program are you seeking a grant? \_\_\_\_\_

Dates and location of program: \_\_\_\_\_

(If the program meets several times over a given period, please be specific.) \_\_\_\_\_

Have you been accepted for this program? \_\_\_\_\_ Yes \_\_\_\_\_ No

Does this program lead to a degree or certification? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, what and when? \_\_\_\_\_

Cost of program for this year: \_\_\_\_\_

*(If you are traveling with your family, include costs for yourself only. No funds are available for family lodging, meals etc.)*

Amount of your yearly continuing education allowance: \_\_\_\_\_

A. Congregation's contribution: \_\_\_\_\_

B. Your Contribution: \_\_\_\_\_ *(including your Continuing Education allowance)*

C. What amount do you seek from presbytery? \_\_\_\_\_

Have you received monies in the past for this particular educational program? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, for what years? \_\_\_\_\_

How will you share with others the skills and knowledge you gained through your program? \_\_\_\_\_

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

Anything else you would like us to know? \_\_\_\_\_

\_\_\_\_\_

**This money is to be used only for the program listed above**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

The session of the \_\_\_\_\_ Church recognizes and approves of this continuing education for \_\_\_\_\_.

\*Signature of Clerk: \_\_\_\_\_

Date: \_\_\_\_\_

\*If you are an at large member of presbytery, please have this application endorsed and signed by the session of the congregation in which you are worshipping.

Committee on Ministry Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Send original to the Committee on Ministry  
email address: [greatriverscom@gmail.com](mailto:greatriverscom@gmail.com).

<i>FOR PRESBYTERY OFFICE USE ONLY</i>
DATE RECEIVED: _____
COM APPROVED: _____
CHECK MAILED: _____