## Presbytery of Central Nebraska Leadership Development Grant Application

	Date			_	
	Name			_	
	Address			_	
	Position at Church			_	
				_	
	Phone			<u> </u>	
	Email			_	
	Event Name				
			Date(s)		
	Cost of Event:				
	Registration	\$			
	Travel/Mileage				
	Accommodations	\$			
	Meals	\$			
	TOTAL COST	\$			
	Amount Requested:	\$	(up to \$1000)		
	Funds for this grant are paid	d by reimburs	ement following the event. Receipts r	nust be	
	submitted prior to payment	t being issued	•		
	On a separate piece of paper, please answer the following questions:				
	<ul> <li>What do you hope to learn/gain from this event?</li> </ul>				
	How will this event strengthen your ministry?  When completed email to: office@centralnepresby.org				
	Or mail to: Presbytery of	Control Nobr	acka		
		s & Budget Co			
	4111 4th Ave	_			
	Kearney, NE 6	68845			
	Business & Budget Committee Approval Date				
		Signature of Committee Chairperson			
		Check Sent Date			