



## Grants for Ministerial Leaders

Print this form, complete legibly, and mail to address below.

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_

Church or Agency \_\_\_\_\_

Name of continuing education event:

\_\_\_\_\_

Location of event \_\_\_\_\_

Date of event \_\_\_\_\_

Sponsoring Organization

\_\_\_\_\_

Course description:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe how you see this continuing education event bringing NEW LIFE to your congregation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

My goals for NEW LIFE in my congregation are:

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List other events you have attended using a **Cultivating NEW LIFE** grant:

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Signature \_\_\_\_\_

Date \_\_\_\_\_

Continuing Education Units (CEUs) may be added to your profile by obtaining signed documentation from the program's registrar and sending a copy to American Baptist Personnel Services, P.O. Box 851, Valley Forge, PA 19482-0851.

**Print this form and mail to:**

Financial Aid Office  
National Ministries  
P.O. Box 851  
Valley Forge, PA 19482-0851

1-800-ABC-3USA, ext. 2067 or FAX 610-768-2453

Questions? E-mail [Karen.Drummond@abc-usa.org](mailto:Karen.Drummond@abc-usa.org)