

Council on Clergy Development
Board of Ordained Ministry
California-Nevada Annual Conference of the United Methodist Church

**Application for Ministerial Education Funds for Clusters, Caucuses,
Groups, Fellowships, and Other Assemblies**

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____

Relationship to the Annual Conference: _____

Describe the Use of Cluster Grant:

Date of the event: _____ Location: _____

Expected Attendance: _____ Amount of request: _____ (Max \$500.00 per year)

To whom should the check be made payable?

Please share the importance of this continuing education opportunity to your clergy cluster or group, to the development of your congregation, and to the mission of the Annual Conference.

Signature of Applicant: _____

Signature of District Superintendent: _____

Mail or fax to:

Rev. Don Lee
Sierra Pines UMC
22559 W. Hacienda Dr.
Grass Valley, CA 95949-8372
Phone: 530.268-6907
Fax: 530.268.4788
revdonlee@gmail.com