

## Empowering Leadership grant application

This application form is for individuals who belong to a congregation within the Southern Ohio District of the Church of the Brethren who seek financial support for enhancing their capacity to perform their current Church Leadership position or for developing skills that will prepare them for future Church Leadership.

**Name of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Congregation:** \_\_\_\_\_

**Explanation:** Please explain your vision for enhanced capacity for Church Leadership and how this grant would be used to support your vision.